**附件：**

 **2019青少年智能科技教育工作部署会报名回执表**

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| **姓名** | **性别** | **单位名称** | **手机** | **电子邮箱** |
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| 单位统一社会信用代码（用于开具发票） |  |

**注：此表复制有效，请认真填写，发送到zhangyc@cncktd.com**