第十届化工行业风险管控与隐患治理交流研讨会报名表

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 单位名称 | | |  | | | | | 邮政编码 | |  | | | 联系人 | |  |
| 发票邮寄地址 | | |  | | | | | | | | | | 联系电话 | |  |
| 增值税普通发票□增值税专用发票□（下列信息请与本单位财务人员核对后填写，凭此开具发票） | | | | | | | | | | | | | | | |
| 单位 | | 纳税人识别号 | | | 开户银行 | | 开户账号 | | 地址 | | | 电话 | | 备注 | |
|  | |  | | |  | |  | |  | | |  | |  | |
| 参加人员信息 | | | | | | | | | | | | | | | |
| 姓名 | 性别 | | | 部门及职务 | | 联系电话 | | | | | 电子信箱 | | | | |
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| 备注 | | | 住宿费用330元/间 预定住宿：是□/否□ 单间□/合住□ | | | | | | | | | | | | |
| 入住日期： 离店日期： 其他事项： | | | | | | | | | | | | |

注：请于11月28日前将本报名表发至zhangxiaogang@ccsa.net.cn。房间有限，请填写是否住宿。