**反 馈 单**

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| --- | --- | --- | --- | --- | --- |
| 单位名称 |  | | | | |
| 通讯地址 |  | | | 人数 | 共 人 |
| 姓 名 | 性别 | 职务 | 电话 | 手机 | E-mail |
|  |  |  |  |  |  |
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| 费 用 | 活动不收取会务费。食宿费用自理。 | | | | |