**下载回执表地址：www.csmpte.com （学会活动版块）**

**培训班回执**

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| **单位** |  | | | **电话** | |  | **传真** |  |
| **地址** |  | | | | | | **邮编** |  |
| **姓名** | **性别** | **职务** | **手机** | | **E-mail** | | **是否需要单间** | **是否参加考察** |
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**注意事项：请参加培训人员务必携带身份证原件！！！！**

**会务组不设接送站服务！**