**附件：**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **2023年固体废物处理处置技术人员培训班报名表** | | | | | | | | | | |
| **报名 单 位** | | | | | | | | | | |
| **\*单位名称** | |  | | | | **\*联系人** | |  | | |
| **\*邮编** | |  | | | | **\*联系方式** | |  | | |
| **\*通讯地址** | |  | | | | | | | | |
| **参培人员** | | | | | | | | | | |
| **序号** | **\*姓名** | | | **\*性别** | **\*身份证号** | | **\*手机** | | **\*邮箱** | **\*是否住宿** |
| **1** |  | | |  |  | |  | |  |  |
| **2** |  | | |  |  | |  | |  |  |
| **3** |  | | |  |  | |  | |  |  |
| **4** |  | | |  |  | |  | |  |  |
| **5** |  | | |  |  | |  | |  |  |
| **6** |  | | |  |  | |  | |  |  |
| **7** |  | | |  |  | |  | |  |  |
| **8** |  | | |  |  | |  | |  |  |
| **9** |  | | |  |  | |  | |  |  |
| **10** |  | | |  |  | |  | |  |  |
| （如不够，请另附表格填写） | | | | | | | | | | |
| **住 宿 学 员 请 继 续 填 写 此 栏(住 宿 费 用 自 理）** | | | | | | | | | | |
| **\*住宿日期** | | | 9月6日 🞎 9月7日 🞎 | | | | | | | |
| **\*所需房型** | | | 标准间🞎 | | | | | | | |
| **\*住宿标准** | | | 八一宾馆：标间260元🞎 | | | | | | | |
| |  |  | | --- | --- | | **开票信息** |  | | | | | | | | | | | |
| **\*专票**🞎  **\*普票**🞎 | | | 单位名称： | | | | | | | |
| 税号： | | | | | | | |
| 地址： | | | | | | | |
| 开户银行： | | | | | | | |
| 账号： | | | | | | | |
| **证书及发票邮寄地址** | | | | | | | | | | |
| **\*收件人** | | |  | | | | | | | |
| **\*联系方式** | | |  | | | | | | | |
| **\*地址** | | |  | | | | | | | |
| **备注** | | | 1、\*如果有需要与认识的参培学员合住一个房间的，请提前告知会务组； | | | | | | | |
| 2、\* 标注为必填内容，谢谢配合。 | | | | | | | |