附件2

参会回执

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 姓名 | 单位 | 职务 | Email | 手机 |
|  |  |  |  |  |
|  |  |  |  |  |

备注：填写后请传真至010-82217304或发送chengdufang@ccpit.org。