**附件:**

校园传染病防控研讨交流会报名回执表

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **姓 名** | **所在单位** | **性别** | **职 务** | **邮 箱** | **手机号码** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |