附件2

2018年农村中学科技馆工作研讨及业务培训会参会回执

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| **省（自治区、直辖市）或新疆生产建设兵团名称： 带队负责人姓名：** | | | | | | | | |
| **姓名** | **性别** | **年龄** | **民族** | **单位** | **职务** | **联系电话** | **邮箱** | **备注** |
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注：本次会议不安排接送站服务。