**培训班报名表**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 培训时间 | |  | | | | 培训地点 |  | | |
| 单位名称 | |  | | | | | | | |
| 通信地址 | |  | | | | | | | |
| 电子邮箱 | |  | | | | | 邮政编码 |  | |
| 姓名 | | 性别 | 职称 | | 身份证号码  （证书用） | | 手机 | 邮箱 | 学习类别 |
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| 缴费方式 | | □ 汇款交费 □现场交费 | | | | | | | |
| 是否住宿 | | □ 是（□ 单住 □ 合住） □否 | | | | | | | |
| 是否用餐 | | □ 是（□ 中餐 □ 晚餐） □否 | | | | | | | |
| 发票  信息 | 单位名称 | | |  | | | | | |
| 纳税人识别号 | | |  | | | | | |
| 单位地址 | | |  | | | | | |
| 联系电话 | | |  | | | | | |
| 开户银行 | | |  | | | | | |
| 银行账号 | | |  | | | | | |
| 所需发票 | | | □ 增值税专用发票 □增值税普通发票 | | | | | |

报名邮箱：**gzicia@163.com**  注：此回执复印有效，请尽快回传