**2022年江西省挥发性有机物连续自动监测系统培训班报名回执表**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 单位名称 | | |  | | | | | | | |
| 教材收件址、联系人及联系电话 | | |  | | | | | | | |
| 证书收件址、联系人及联系电话 | | |  | | | | | | | |
| 邮箱 |  | | | | 报名联系人 | |  | 电话 | |  |
| 微信号 | |  |
| 姓 名 | | 性别 | | 学历 | | 身份证号码 | | | 手机号码 | |
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| **开票信息（增值税电子普票）** | | | | | | | | | | |
| 付款单位名称 | | | | |  | | | | | |
| 付款单位纳税人识别号 | | | | |  | | | | | |

**注：1、报名人员可根据实际人数增添，按报名先后顺序安排培训。**

**2、将报名表、汇款凭证于10月17日之前发送至邮箱1578706806@qq.com。**