附件1

**农垦企业合规管理与法律风险防控培训班报名回执**

联系人：\_\_\_\_\_\_\_\_\_\_\_ 联系电话：\_\_\_\_\_\_\_\_\_\_\_ 邮箱：\_\_\_\_\_\_\_\_\_\_\_

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| **姓名** | **性别** | **单位** | **职务** | **手机号** | **邮箱** | **身份证号** | **开票信息：名称、统一社会信用代码、住所、开户行、账户、电话** |
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此表可复制，请于8月11日前发送电子邮件至邮箱nkpxb@163.com。