附件2

比赛回执

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 办学点名称 |  | | | |
| 姓名 | 性别 | 职称/职务 | 联系电话 | 住宿时间（晚） |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |