附件

地方协会财务人员培训班学员报名表

**地方协会名称：**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **序号** | **姓 名** | **性别** | **年龄** | **单位及职务** | **往返航班（车次）** | **手机号** |
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