附件

重庆市安全生产协会企业安全文化建设推进师培训报名表

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **单位名称** | |  | | | | | **联系人** | |  | **联系电话** | |  |
| **会员单位** | | **是□ 否□** | | | | | | | | | | |
| **序号** | **姓名** | | **性别** | | **部门/职务** | **学历** | | **联系电话** | | | **备注** | |
| 1 |  | |  | |  |  | | （不够可增加行） | | |  | |
| 2 |  | |  | |  |  | |  | | |  | |
| 3 |  | |  | |  |  | |  | | |  | |
| 4 |  | |  | |  |  | |  | | |  | |
| **开 票 信 息** | | | | | | | | | | | | |
| 发票类型  专票 □  普票 □ | | | | 名 称：  纳税人识别号：  地 址、电 话：  开户行及账号： | | | | | | | | |

**注：会员单位回传报名表时一并回传缴纳会费的复印件。邮箱：2478003531@qq.com**。