附件：

参会回执

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 单位名称 | |  | | | | | |
| 单位地址/邮编 | |  | | | | | |
| 联系人 | |  | | | 职务/职称 |  | |
| 手机 | |  | | | 邮箱 |  | |
| 参会代表信息 | | | | | | | |
| 姓名 | 性别 | | 职务/职称 | 身份证号码 | | 联系电话 | 邮箱 |
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| ...... |  | |  |  | |  |  |
| 对测绘科技创新需求信息征集 | | | | | | | |
|  | | | | | | | |

**请于2021年12月1日前将回执填好后发送至邮箱：19713366@qq.com。**