附件

通用课程培训需求回执表

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **参加培训班名称** | |  | | | | | **开班日期** | | |  |
| **单位名称**  **（代号）** | |  | | | | | | | | |
| **单位地址** | |  | | | | | **邮政编码** | | |  |
| **联系人姓名** | |  | | | | **传真** |  | | | |
| **手机/办公电话** | |  | | | | **邮箱** |  | | | |
| **参会人员情况** | | | | | | | | | | |
| **序号** | **姓名** | | **所在部门/职务** | **手机** | | | | | **参加培训课程** | |
| **1** |  | |  |  | | | | |  | |
| **2** |  | |  |  | | | | |  | |
| **3** |  | |  |  | | | | |  | |
| **4** |  | |  |  | | | | |  | |
| **客户开票信息** | | | **增值税普通发票是□否□ 增值税专用发票是□否□** | | | | | | | |
| **单位名称** | | |  | | | | | | | |
| **纳税人识别号** | | |  | | | | | | | |
| **地址、电话** | | |  | | | | | | | |
| **开户行** | | |  | | | | | | | |
| **账号** | | |  | | | | | | | |
| **付费方式** | | | **口转账** | | **金额（元）** | | |  | | |
| **填写说明：**  1.此表请按相应培训班通知报名截止时间邮件至联系人邮箱gcy199@163.com；  2.请正确填写各栏内容；办公电话、传真请注明区号；  3.如参加人员有变化，请及时通知联系人谷老师。 | | | | | | | | | | |