**《智慧化应用助力企业降本增效、多元经营创收》**

**公益讲座报名表**

 企业名称（盖章）： 企业联系人： 联系电话：

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 姓  名 | 性别 | 民族 | 职务 | 手 机 | 备注 |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |