**第31届中国厨师节回执表**

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| 单位名称 |  | | | | | | | |
| 联系人 |  | | 手机 |  | | | 职务 |  |
| 姓名 | 性别 | 联系方式 | | | 身份证号 | | | |
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注： 请于10月31日前将参会回执发至邮箱。

电子邮箱： office828@126.com