**附件1：**

**江苏省植物学会2019年学术年会第二轮回执**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **姓 名** |  | **性别** | |  | | | **职务/职称** | |  |
| **工作单位** |  | | | | | | | | |
| **是否提交**  **会议论文** | □是  □否 | | **论文题目** | | |  | | | |
| **是否申请**  **会议报告** | □是  □否 | | **报告题目** | | |  | | | |
| **手 机** |  | | | | **Email** | | |  | |
| **是否住宿** | □是 □否 | | | | **住宿要求** | | | □标间 □单间 | |