**附件2：**

**中科院上海分院第四届春华杯羽毛球比赛参赛报名表**

**单位名称： 领队姓名： 电话：**

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| --- | --- | --- | --- | --- |
| **姓名** | **性别** | **身份（学生/职工）** | **参赛项目** | **备注** |
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**注：请各单位按规定为参赛队员购买意外保险。**

**中科院上海分院第四届春华杯羽毛球比赛领导干部组报名表**

|  |  |  |
| --- | --- | --- |
| **姓名** | **年龄** | **职务** |
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**注：请各单位按规定为参赛队员购买意外保险。**