附件2

**健身气功裁判员精英提高班报名表**

单位盖章： 联系人： 联系电话:

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| 姓名 | 性别 | 民族 | 身份证号码 | 联系电话 | 单位 |
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注：此表可复印

 甘肃省社会体育管理中心办公室 2021年4月22日印