**参加AOTCA 2018年会报名表**

**分团名称：＿＿＿＿＿＿＿＿ 注册税务师协会 联系人：＿＿＿＿＿ 联系方式：＿＿＿＿＿**

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| **序号** | **姓名** | **性别** | **单位及职务** |
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