**附件一**

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| 语文阵地的守望者——钱梦龙语文教学研讨会参会登记表 |
| 序号 | 单位名称(省、市） | 姓名 | 性别 | 邮编 | 联系电话 | 是否住宿 |
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**附件二**

钱梦龙语文教学研讨会回执单

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| 单位名称 |  |
| 通讯地址 |  |
| 参会人数 |  | 联系人 |  | 电话 |  |
| 姓名 | 性别 | 职称 | 手机号码 | 电子信箱 |
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| 是否住宿 | 17日 □ | 18日 □  | 19日 □ |
| 备注 | 1. 为了确保您顺利参会，烦请您将此表填好后以电子文档或传真形式传至会

务组确认备查。邮箱：xurihongwen999@163.com 传真：010-65263179 1. 报名截止时间2015年12月8日
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