附件2：

辽宁省中小学教师经典诵读集中展示活动报名表

市 联系人： 联系方式：

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **姓名** | **性别** | **身份证号** | **单位** | **职务/职称** | **联系方式** | **备注** |
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