附件3

**省、自治区、直辖市推荐参赛报名表**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **推荐单位名称** | | |  | | | **联系地址** | | |  | | |
| **联系人及职务** | | |  | | | **联系电话** | | |  | | |
| 安全卫士个人赛 | | | | | | | | | | | |
| **序号** | **姓名** | **单位名称** | | | **部门及职务** | | **身份证号** | | | **电话** | **邮箱** |
| **1** |  |  | | |  | |  | | |  |  |
| **2** |  |  | | |  | |  | | |  |  |
| **3** |  |  | | |  | |  | | |  |  |
| 安全卫士团队赛 | | | | | | | | | | | |
| **序号** | **团队名称** | **口号** | | **姓名** | **单位名称** | | **部门及职务** | **身份证号码** | | **电话** | **邮箱** |
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| **承诺说明** | | **推荐单位承诺所有参赛人员均为在本单位工作六个月以上的正式合同制员工。**  **（单位公章）**  **年 月 日** | | | | | | | | | |

备注：组委会提供武汉光谷潮漫凯瑞国际酒店协议价：350元/标间、单间（均含早餐）；

武汉光谷潮漫凯瑞国际酒店联系方式：黄宇15007113921