附件：

2023年羽毛球联谊赛报名表

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| **公司名称** | **姓 名** | **性别** | **职务** | **手机号码** | **是否种子选手** | **是否参加男女混合双打** |
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注：报名截止时间 8月29日17:00，省协会邮箱：ahxedkgsxh@163.com