附件2：

2020年长春市职工篮球赛报名表

**报名单位（加盖公章）：**

**领队： 联系电话：**

**教练员： 联系电话：**

**联系人： 联系电话：**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **序号** | **姓名** | **年龄** | **场上位置** | **身份证号码** | **手机号** | **职务** |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |
| 11 |  |  |  |  |  |  |
| 12 |  |  |  |  |  |  |

**注：此表纸质和电子都需要。**