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| **北京市卫生经济学会**  **第十届理事会理事登记表** | | | | | | | |
| **姓名** |  | **性别** |  | **民族** |  | **出生年月** |  |
| **职务** |  | **职称** |  | **学历** |  | **政治面貌** |  |
| **手机** |  | **传真** |  | | **座机** |  | |
| **工作单位** |  | | | **邮箱** |  | | |
| **通讯地址** |  | | | | **邮编** |  | |
| **主要工作经历** |  | | | | | | |
| **专业及主要研究 成果** |  | | | | | | |
| **所在单位意见（盖章）** | | | | **学会审批意见（盖章）** | | | |
|  | | | |  | | | |
| **年 月 日** | | | | **年 月 日** | | | |