**社團法人桃園市康復之友協會**

 **114年「身障者激發潛能自我成長營」活動報名表**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 編號 | 姓名 | 性別 | 出生日期 | 身分證字號 | 未滿20歳家長姓名出生年月日身分證字號 | 素食者請備註 |
| 1 |  |  |  |  |  |  |
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| 13 |  |  |  |  |  |  |
| 單位名稱 |  |
| 聯絡人 |  |
| 連絡電話 |  |
| 住址 |  |

備註：自即日起至10月31日止，為利作業請一律以e-mail報名。