**晋中市第二届中医养生棒培训暨2022年晋中市二级社会体育指导员培训报名表**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **单位名称（章）** | |  | | | | | | |
| **负责人** | |  | | | | **联系电话** |  | |
| **培训人员名单** | | | | | | | | |
| **序号** | **姓名** | | **性别** | **年龄** | **社会体育指导员等级** | | | **是否参加过中医健身棒培训** |
| **1** |  | |  |  |  | | |  |
| **2** |  | |  |  |  | | |  |
| **3** |  | |  |  |  | | |  |
| **4** |  | |  |  |  | | |  |
| **5** |  | |  |  |  | | |  |
| **6** |  | |  |  |  | | |  |
| **7** |  | |  |  |  | | |  |
| **8** |  | |  |  |  | | |  |
| **9** |  | |  |  |  | | |  |
| **10** |  | |  |  |  | | |  |