附件

烟台市慈善品牌标识及宣传标语征集活动报名表

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓 名 |  | | | | | | | | 性 别 | | | |  | | | | | |
| 联系电话 |  | | | | | | | | 电子邮箱 | | | |  | | | | | |
| 工作单位 |  | | | | | | | | 通讯地址 | | | |  | | | | | |
| 身份证号 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 作品类型 | □ 慈善品牌标识 □ 慈善宣传标语 | | | | | | | | | | | | | | | | | |
| 应征类型 | □ 个人应征 □机构应征，机构名称\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | | | |
| 作品名称： | | | | | | | | | | | | | | | | | | |
| 作品简介（可附页）： | | | | | | | | | | | | | | | | | | |
| **我承诺：我已阅读、理解并接受《烟台市慈善品牌标识（LOGO）及宣传标语征集公告》并保证所填事项属实。**  承诺人（承诺单位）签名/盖章：  签署日期： | | | | | | | | | | | | | | | | | | |