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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **第九届航天技术创新国际会议“会议费”退费申请表** | | | | | | | | | |
| **序号** | **注册号** | **姓名** | **订单金额** | **缴费方式(非平台缴费需提供收款信息）** | **缴费时间** | **退费金额** | **退费原因** | **收款账户名称、账号、开户行信息** | **联系人** | **联系方式** |
| 1 |  |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |  |