附件

“五月的鲜花”文艺汇演节目报名表

**院系：**

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| **节目信息** | | | | | |
| 节目名称 | |  | | 节目类别 |  |
| 演员人数 | |  | | 节目时长 |  |
| **演员信息**（第一位为负责人） | | | | | |
| 姓名 | 性别 | | 手机 | 邮箱 | |
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