Membership application to the "Italian Society of Histochemistry"

Send the membership application, duly filled and signed, by mail or e-mail to:
Secretariat "Italian Society of Histochemistry"

Department of Biomolecular Sciences, Scientific Campus Enrico Mattei

Via Cà le Suore, 2/4 - 61029 Urbino (PU)

e-mail: info@istochimica.it

The undersign	ned				
First and Last	Name		Ti	tle	
Fiscal Residen	ce	Zip Code			
phone					
E-mail					
Postal address	s (if different from fisca	l residence)			
		Zip Code	· · · · · · · · · · · · · · · · · · ·		
Affliations .					
applies to	be admitted to the "I	Italian Society of Hi	stochemistry" as	s an Ordinary Mei	nber.
		Main research act	ivities		
Date.		Signature .			
		PRESENTEI	RS		
1) First and La	st Name		Signature .		
2) First and La	st Name		Signature .		
(Statute, Art. 3). application. The paccepting the Stat The data reported	rill be submitted for the ap The new member will pa position of Member will tute and the Regulations. In this form are protect fir use by the Society will	be formalized at the san ed by Law no. 675 of 3	ip fee starting from ne time as filling in 1.XII.1996 ("privac	the year of acceptant the Register of Mem	ce of the lbers and
For the Secretary	· Application submitted o		necented	_ raiseted	