

# *Italian Society of Histochemistry*

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## **MEMBERS' REGISTRY FORM**

Please fill out and send by 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**

First and Last Name . . . . . Title . . . . .

Fiscal Residence . . . . .  
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Affiliations . . . . .

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## **MAIN RESEARCH TOPICS**

### **Authorization pursuant to Law no.45 of 02/26/2004 and succ. changes**

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*Secretariat "Italian Society of Histochemistry"*  
*Department of Biomolecular Sciences, Scientific Campus Enrico Mattei*  
*Via Cà le Suore, 2/4 - 61029 Urbino (PU), info@istochimica.it*