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***Gruppo Italiano Staminali Mesenchimali***

**GRUPPO ITALIANO STAMINALI MESENCHIMALI (GISM)  
Membership request**

FIRST NAME AND LAST NAME	
OCCUPATION	
DATE OF BIRTH	
AFFILIATION	
DEPARTMENT	
ADDRESS	
PHONE	
FAX	
MAIL	
SCIENTIFIC INTEREST	

DATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_

Send the form and a C.V.to: [enrico.lucarelli@gisonline.it](mailto:enrico.lucarelli@gisonline.it)