FSTD.1915	<u> </u>		
Name -			
Designation -			
U			
Address In	estitutional		Home
T	elephone :		Telephone :
	-		Fax :
E·	-mail :		E-mail :
*Type of Mem	ıbership	Life/Ordinary/S	Student
Area of interes	st in Cell Biolo	gy	
Number of pa	ne		
Membership s	ponsored by		
Date :			Signature of applica
Received by Se	ecretary		
Admitted for 1	Membership o	1	
Membership N	No		
Secretary		Treasurer	President
* Rate of Mem	ıbership Subsc	ription	
Life			
Ordinary Student			hy research supervisor
		rer annum (to be certified	i by research supervisor)
		er annum + \$ 5.00 Adm	nission Fee
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