

Title: Pr Dr Mr Ms

First name:

Last name:

Affiliation (University, Institution):

Laboratory:

Address:

Phone number:

Fax number:

E-mail:

Section to which you wish to be affiliated (maximum 2 choices):

- Molecular and Cellular Neuroscience
- Neuroendocrinology
- Integrated and Clinical Neuroscience
- Cognitive, Computational and Theoretical Neuroscience

Annual fees:

- Regular Member 40 €
- Student member* 15 €
- Sponsor Member ≥ 100 €€

(*Provide a copy of your student ID)

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