



10<sup>TH</sup> INTERNATIONAL CONFERENCE ON  
QUALITY OF MEDICAL LABORATORIES

10. MEDNARODNA KONFERENCA O  
KAKOVOSTI MEDICINSKIH LABORATORIJEV

SZ  
K  
LM

Slovensko združenje  
za klinično kemijo  
in laboratorijsko  
medicino

**TUESDAY, NOVEMBER 25<sup>TH</sup> 2025**

Four Points by Sheraton Ljubljana Mons, Pot za Brdom 4



# REGISTRATION FORM

## Registration

Please send completed registration form to address: Slovenian Association for Clinical Chemistry and Laboratory Medicine, Dunajska cesta 22, 1000 Ljubljana, Slovenia, or by e-mail to [info@szkklm.si](mailto:info@szkklm.si).

**Registration deadline: Nov 7<sup>th</sup>, 2025**

## Participation fee payment

Participation fee in amount of **€200 + VAT** is payable upon receipt of the invoice, which will be issued on the basis of the received registration form.

## Cancellation

Any cancellation or modification will only be accepted in writing till Nov 19<sup>th</sup>, 2025, at: Slovenian Association for Clinical Chemistry and Laboratory Medicine, Dunajska cesta 22, 1000 Ljubljana, Slovenia.

In case of later cancellation or change, the registration fee will be fully charged.

## Additional information:

For additional information, please call **+386 5 9976089** or send an e-mail to [info@szkklm.si](mailto:info@szkklm.si).

# REGISTRATION FORM

## PARTICIPANT INFORMATION

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First name and last name

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Institution

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Street

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City (postcode)

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Phone

E-mail address

## PAYMENT DETAILS

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Company (institution) / Person (first name and last name)

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Tax identification number

Taxable person: ☐ YES ☐ NO

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Street

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City (postcode)

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Telephone

E-mail address

We acknowledge, that the registration fee in amount of €200 + VAT will be payed on the SZKKLM bank account on the basis of the received invoice.

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Date, signature of responsible person, stamp