Stuttering Treatment:

Clinically important recent and current treatment developments 28.- 29. 5. 2010.

Chidren's Hospital Zagreb, Klaićeva 16, Croatia

Please complete this form in capital letters and return by fax or e-mail with payment to:



T: +385 3094 783

F: +385 3017 009

E: logopedski-centar@zg.t-com.hr www.logopedski-centar.com

Udbinska 16, 10000 Zagreb, Croatia

Please note that the number of participants is limited and participation is on a first come, first served

Please use one form for each registration.

Please indicate how you would like your title and name to be written on any official documentation.

Title: Prof Dr Mr Mrs Ms Other
Last name:
First name:
Institution:
Address:
City:
Postal code:
Country:
Phone:
Fax:
Email:
Please indicate if you do not want your name, institution and e-mail to be on the delegate list

Registation Fees:

Fee €170 / For Croatian Participants 1.000 kn + PDV

Discounted Student Fee €85* / For Croatian Participants 500 kn + PDV*

*Regular undergraduate students; students need to enclose the confirmation of their faculty.

Payment is possible by Bank transfer:

Name of Bank: VOLKSBANK d.d.

Address of Bank: Slovenska 24, HR - 10000 Zagreb

SWIFT: VBCRHR22

Bank Account Name: LOGOPEDSKI CENTAR, ZAGREB

IBAN: HR9125030071100014559

For Croatian Paticipants:

Kunske uplate na žiro račun Logopedskog centra: 2503007-1100014559,

model: 99, poziv na broj: OIB, opis plaćanja: Uplata za radionicu