

MEMBERSHIP REGISTRATION FORM

Name:	
Profession:	
Employed:	
Phone:	Mobile:
E-mail address:	
Mailing address:	

I register as a member of Slovensko društvo za skupinsko analizo (Group Analytic Society of Slovenia).

I wish to participate in the activities of the Group Analytic Society of Slovenia (please mark):

- case presentations
- presentations of my professional or academic work
- reviewing literature
- other: _____

I understand that my failing to pay my membership fee may result in the termination of my membership.

Date:

Signature:

Metelkova 15, 1000 Ljubljana, Slovenija, tel.:/phone +386 (1) 431 04 16, mail: info@sdsa.si Predsednik/Chair Jožica Petek, Tajnik/Secretary Iztok Prosen, Blagajnik/Treasurer Tadej Oražem Člani odbora/Committee members Vladislava Stamos, Brigita Žugman, Breda Leban, Barbara Čibej Žagar