

ESC/EACVI Echocardiography Laboratory Accreditation

REGISTRATION FORM

Laboratory information

Laboratory name:		
Address:		
City:	Country:	
Website:		
Generic email:		

Persons awarded by an EACVI individual certification:

1.	Title	Name:	Surname:	Position:	
	TTE	Validity term:			
2.	Title:	Name:	Surname:	Position:	

Contact: (this person will be responsible for filling the forms on the EACVI Laboratory online platform. He/She will have to use his/her my ESC account details to login on the platform or create one)

Name:	Surname:
Email address:	Phone number +
Generic email address of the laboratory:	

Accreditation option

(Select the option you wish to register your laboratory to)

	Application fees
	(excl. VAT (*1))
TTE	€ 417
TTE + TOE	€ 625
TTE + SE	€ 625
TTE + TOE + SE	€833
TOE (after TTE already accredited)	€ 417
SE (after TTE already accredited)	€ 417
TOE + SE (after TTE already accredited)	€ 625

^(*1) The final invoice will be adjusted according to the VAT of the laboratory and its location.

The application fees must be paid when registering for the EACVI Laboratory accreditation process and are not refundable.





Important information about the language of submission

The application must be submitted in **English**.

The documents attached to the application must be the original ones (e.g. patient information leaflets, standard procedure documents, etc.). In case these original documents are in national language, they must be accompanied by English translations.

Please note that the English translation does not need to be officially certified but needs to be clear and understandable. The laboratory is responsible for issuing such translations. The original document must be compliant with the translated one. If it is not the case, we reserve the right to decline the application.

Invoice information

(Mandatory to generate your invoice. Make sure all information is accurate)

Laboratory business name:	
Address:	
Postcode:	City:
Country:	VAT-ID (letters + numbers):
PO number (if any):	
Accountant email address:	

A final invoice, including the VAT applicable to the status of your institute and its location, will be sent to you.

Please return this form fully completed together with the EACVI individual certificate(s) to accreditation@escardio.org

Date:	Electronic or handwritten signature: