



2ND ISTA DNA PROFICIENCY TEST – GENUS SPECIES (WHEAT)

REGISTRATION FORM

If you wish to participate, please complete this form and return it before **30 June 2026**.

Please refer to the announcement for more information.

Participating laboratory:

Is your lab an ISTA Member lab?

If yes, ISTA Lab Code: _____

Name*: _____

Laboratory name: _____

Laboratory Address

Street: _____

City: _____

Country: _____

Post Code: _____

Phone, fax: _____

E-mail: _____

* Person signing the MTA

Name and mail address for sample delivery if different from above:

Name: _____

Street: _____

City: _____

Country: _____

Post Code: _____

Your laboratory is responsible to verify what documents are needed for a successful import of the material. Please state special conditions for sending samples into your country:

Import permit: _____

Phytosanitary certificate: _____

Certificate of origin: _____

Other: _____

If required, an import permit must be submitted to the ISTA Secretariat before the scheduled shipping date by the participating laboratory.