



***MEDNARODNI FESTIVAL ZELIŠČ, ZDRAVILNIH
RASTLIN, KONOPLJE in MEDU**
*****INTERNATIONAL FESTIVAL of HERBS, MEDICINAL PLANTS,
HEMP and HONEY**

***Šampion kakovosti
MEDNARODNO OCENJEVANJE
ZELIŠČ, ZDRAVILNIH RASTLIN,
KONOPLJE MEDU in
EKOLOŠKIH PRODUKTOV**

*****Quality champion
INTERNATIONAL ASSESSMENT OF HERBS,
MEDICINAL PLANTS, HEMP, HONEY and
ORGANIC PRODUCTS**

sLOVEinja, Julij - December 2025
sLOVEnia, July - December 2025

**INTERNATIONAL EVALUATION
of HERBAL PRODUCTS, MEDICINAL PLANTS, HEMP,
ORGANIC PRODUCTS and HONEY
2025**

We kindly invite you to participate in the international professional evaluation of herbal products, medicinal plants, hemp and honey
on

**INTERNATIONAL FESTIVAL OF HERBS, MEDICINAL PLANTS AND HEMP
SLOVEnia 2025**

Consolidate your brand reputation, publicly promote products and increase sales,
on a unique expert assessment of this kind.

The objective excellence of your products will be assessed by an expert panel of recognized experts and
certified professional assessors.

We will award top quality awards for
HERBAL PRODUCTS, MEDICINAL PLANTS, HEMP, ORGANIC PRODUCTS and HONEY,
which confirm the top quality of your products,
which is a tool for marking excellence and advertising your products,
and selected a joint product, which will be awarded the title of
**CHAMPION OF QUALITY OF HERBS, MEDICINAL PLANTS, HEMP, ORGANIC PRODUCTS AND HONEY
2025.**

Submission of samples:
25 NOVEMBER, 2025

at the KGZS Murska Sobota, in the Specialist Office for Herbs
Address:

Chamber of Agriculture and Forestry of Slovenia, Murska Sobota Agricultural and Forestry Institute,
Štefana Kovača Street 40, 9000 Murska Sobota, Slovenia

Expert contractors and project partners:
Chamber of Agriculture and Forestry of Slovenia
KGZS Institute Murska Sobota
Pomurje Herbalists' Association in the public interest in the field of agriculture

APPLICATION FORM
for
INTERNATIONAL EVALUATION OF HERBS, MEDICINAL PLANTS, HEMP,
ORGANIC PRODUCTS AND HONEY

1 / Information on the applicant

Name of the applicant (company, farm, person...):

Street and house number:

Postal code and post office / Country:

Telephone:

Website:

E-mail:

Contact person:

E-mail:

Telephone / Mobi:

Director, representative:

ID Number:

Taxpayer:

YES

NO

2 / Product group (tick):

a.) TEA

b.) PRODUCT OF HERBS, MEDICINAL PLANTS, HEMP, ORGANIC PRODUCT

c.) HERBAL PRODUCT OF HONEY, HONEY, HONEY PRODUCTS OF MEDICINAL PLANTS, HEMP AND HEMP

3 / Sugar content (tick):

the product contains

S - sugar

SF - sugar free

4 / Herbal content:

the product contains

_____ % of herbal content

5 / Country of production:

6 / Bar code (451 ...):

Indicate the numerical bar code of the product if the product code has _____

7 / Date of delivery of products for evaluation: one day before evaluation 25.11.2025

8 / Quantity of products for evaluation:

We report _____ pcs of products

9/ Registration fee: €30.00 for each registered product. When registering **more than 3 products** for evaluation, the registration fee is **€25.00 for all products**. Prices are excluding VAT (we are not a taxpayer).

Payment: The invoice can be settled on the bank account **SI56 6100 0003 0025 242** or at the association's cashier.

For transfers from abroad, the IBAN and BIC number of the Pomurje Herbalists' Association must be provided

IBAN: SI5661000030025242 / BIC: HDELSI22.

Invoice recipient: Pomurje Herbalists' Association, Lendavska 3, 9000 Murska Sobota. **Purpose:** EVALUATION 2025.

10/ Submission of products for evaluation: Please fill out the application form legibly in capital letters and send/submit it together with the products to the following address:

Kmetijsko gozdarska zbornica Slovenije, Kmetijsko gozdarski zavod Murska Sobota, Ulica Štefana Kovača 40, 9000 Murska Sobota, to the specialist office for herbs by 3:00 p.m.

11/ Method of submitting samples for evaluation: NOVEMBER 25, 2025, at the KGZS Murska Sobota, in the specialist office for herbs by 3:00 p.m.

Samples with the attached application form can be submitted in person or sent by post, with the note: **FESTIVAL OF HERBS - PRODUCT EVALUATION**, no later than **November 25, 2025** to the following address: **Kmetijsko gozdarska zbornica Slovenije, Kmetijsko gozdarski zavod Murska Sobota, Ulica Štefana Kovača 40, 9000 Murska Sobota**, to the specialist office for herbs by 3:00 p.m.

Three (3) pieces of each individual product entered for evaluation must be submitted for evaluation. More detailed information on the quantities of individual products is provided in the evaluation rules. Products should be marked with the legally required declaration.

9 / Registration fee:

The bill can be settled on **TRR SI56 6100 0003 0025 242** or at the association's cash desk.

For **transfers from abroad**, the IBAN and BIC number of the Pomurje Herbalists' Association must be provided

IBAN: SI5661000030025242 / BIC: HDELSI22.

Invoice recipient: **Društvo zeliščarjev Pomurje, Lendavska 3, 9000 Murska Sobota, Slovenija.**

Purpose: **ASSESSMENT 2025**

10/ Submission of products for evaluation: Please fill out the application form legibly in capital letters and send/submit it together with the products to the following address: Chamber of Agriculture and Forestry of Slovenia, / **Kmetijsko gozdarska zbornica Slovenije, Kmetijsko gozdarski zavod Murska Sobota, Ulica Štefana Kovača 40, 9000 Murska Sobota, Slovenia**, by **NOVEMBER 25, 2025**, at KGZS Murska Sobota, to the specialist office for herbs by 3:00 p.m.

11/ Method of submitting samples for evaluation: **NOVEMBER 25, 2025**, at the Kmetijsko gozdarska zbornica Slovenije, Kmetijsko gozdarski zavod Murska Sobota, Ulica Štefana Kovača 40, 9000 Murska Sobota.

Samples with the attached application form can be submitted in person or sent by post, with the note: FESTIVAL OF HERBS - PRODUCT EVALUATION, **no later than November 25, 2025 send** to the following address: Kmetijsko gozdarska zbornica Slovenije, Kmetijsko gozdarski zavod Murska Sobota, Ulica Štefana Kovača 40, 9000 Murska Sobota,

Three (3) pieces of each individual product entered for evaluation must be submitted for evaluation. More detailed information on the quantities of individual products is provided in the evaluation rules. The products should be marked with the legally prescribed declaration.

Place and date:

Stamp:

Signature:

PRODUCT REGISTRATION
HERBS, MEDICINAL PLANTS, HEMP, ORGANIC PRODUCTS AND HONEY

INFORMATION ABOUT THE APPLICANT

Name of the applicant (company, farm, person...):

Street and house number:

Postal code and post office / Country:

Telephone:

Website:

Email:

Consecutive product number	1 Product name	2 Group	3 Sugar content	4 Herbal share%	5 Country of manufacture	6 Bar code

NOTES:

Place and date:

Stamp:

Signature:

*If you are submitting multiple products, please add text boxes.

Annex to the Rules on the evaluation of honey and honey products

STATEMENT

Name, surname of the owner of the sample: _____

Title: _____

I declare:

- that the sent (brought) samples of honey were collected by my bees in the area (grazing area, for foreign beekeepers the country of origin of honey).
- I do not use antibiotics in my beekeeping.
- I control safely with registered or permitted means according to the instructions of the producer and veterinarian, following the guidelines of good beekeeping practice.
- Honey is not older than one year.
- I declare that my honey sample has (circle accordingly) **WAS** **WAS NOT** been analyzed for physicochemical properties.
- I agree with the public announcement of the results of the sensory evaluation of honey and with the fact that any awarded sample is exhibited.

In _____, on _____

Signature of the beekeeper: _____