**REGISTRATION FORM OF ICVISP 2018**

**2018 International Conference on Vision, Image and Signal Processing (ICVISP 2018)**

Las Vegas, USA on August 27-29, 2018

[www.icvisp.org](http://www.icvisp.org)

Please note that it is essential for all participants to send in a completed Registration Form, Final Papers (doc & pdf), and Payment Voucher to [icvisp@iased.org](mailto:icvisp@iased.org).

**I. PERSONAL INFORMATION**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| \* Full Name:    First Middle initial Last | | | | |
| \*Position: (Prof. /Assoc. Prof. /Asst. Prof. /Dr. /Mr. /Ms. ) | | | Male □ Female □ | |
| \* Will you attend the conference in person?  YES □ NO □  \*Participant’s Full Name:   * Register only one person on each registration form, print name exactly as you wish it to appear on your name badge. * Any changes, please inform us 30 days before the conference, or the participant should be responsible for the consequences.   \*Participant’s Affiliation (Organization or University): | | | | One-inch-Photo here |
| It is free for participants of ICVISP 2018 to join the items below. If you won’t join, Please mark it with N. If you will join, Please mark it with Y.  1. Lunch on August 28 ( )  2. Dinner Banquet on August 28 ( )  Special Dietary:  Vegetarian □ Vegan □ Muslim □ Gluten Free□ Halal □ Allergy to nuts □ Lactose Intolerant □ No Seafood □ Other □ (Please specify: ) | | | | |
| Special Requirements for the Conference? Please list any special requirements | | | | |
| \*Post Address: | | | | |
| Emergency Contact ( name, phone number): | | | | |
| \*Invoice Title:  Usually refer to the name of whom to reimburse the registration fee, such as the university name, company name. | | | | |
| \*City: | | \*State/Province: | | |
| \*Country: | | \*ZIP/Post Code: | | |
| \*Tel.: | \*E-mail: | | | Fax: |
| Student ID Number: | | IASED Member Number: | | |
| \*Paper ID: | |  | | |
| \*Paper Title: | | | | |
| \*Paper Authors: | | | | |
| \*Paper Pages: | | Additional Page: | | |
| How did you find out about the conference?  □ Colleague told me  □ Google search  □ CFP conference list (Please specify: )  □ Direct email notification  □ Other, please specify | | | | |

II. CONFERENCE FEES (BY US DOLLAR)

|  |  |  |  |
| --- | --- | --- | --- |
| Category | Early (Until March. 31) | Regular (Until July. 10) | Onsite |
| IASED Member | USD 530 | USD 580 | USD 630 |
| Nonmember | USD 550 | USD 600 | USD 650 |
| Student | USD 450 | USD 500 | USD 550 |
| One-day Program | USD 380 | USD 430 | USD 480 |
| Special Session | Free | Free | Free |

**Extra Term**

|  |  |
| --- | --- |
| Item | Cost |
| Extra Page / Per page | USD 100 |
| Extra Paper Upload | USD 320 |
| Extra Banquet Ticket | USD 50 |
| One Day Tour | TBD |
| Total Conference Fees |  |

\* One regular registration can cover a paper within 6 pages, including all figures, tables, and references, extra pages need to pay Additional page fee.

\*\* All the papers will be published on-line.

**III. Payment Terms**

**Credit Card Online Payment linkage (VISA and Master card ONLY. No Handling Fee)**

<http://meeting.yizhifubj.com.cn/web/main.action?meetingId=351>

Please make sure you have VISA or Master Card Credit Card before clicking this link, and you should also calculate the right amount and pay.

**Please fill in the E-mail which you used when you paid the fee and Confirmation Order Number you received after paying.**

|  |  |
| --- | --- |
| E-mail: | Confirmation Order Number: |

**IV. IASED Member Application**

Join IASED now to quality for member registration rates. Please compile and return the [Membership Form](http://www.iased.org/ueditor/php/upload/file/20171113/1510544137635722.docx ) along with your CV to [membership@iased.org](mailto:membership@iased.org). Your application will be processed in 5 working days.

**V. Other**

Finally, we suggest you write down a biographical sketch here, for use of making introductions by Session Chair before your presentation gets started.

20-120 Words(1-6.5 lines)



ICVISP 2018 Conference Committee

Las Vegas