

REGISTRATION FORM

SHOW & CONFERENCE REGISTRATION FEES

REQUIRED INFORMATION:

Name: _____

Title: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Country: _____

Phone: _____

Fax: _____

Email: _____

(Note: Free show admission to Robots & Vision Show and ATEexpo is included with all conference registrations.)

Show Only - FREE!

September 27-29

Includes Grand Opening Keynote Session on Tuesday, September 27 and Session 8: Emerging Robot Applications on Wednesday, September 28

FREE! (if this form is submitted by August 26 or brought to the show with you. Without this form, onsite admission is \$30.)

No one under 18 admitted.

Strengthening Industry Pass

September 26-29

Allows you to attend any of the six tutorials and eleven conference sessions, provides tutorial handouts, a CD with all conference handouts, and one ticket to "The Spirit of Innovation Luncheon" on September 28. *Your best value!*

By August 26-\$1095

After August 26 & onsite-\$1195

Please indicate by number which tutorials and sessions you plan to attend:

Tutorials _____

Sessions _____ amount due \$ _____

Conference Sessions Only Pass

September 27-29

Allows you to attend any of the eleven conference sessions and provides you with a CD containing all conference handouts, and one ticket to "The Spirit of Innovation Luncheon" on September 28. Does not include Monday tutorials.

By August 26-\$775

After August 26 & onsite-\$875

Please indicate by number which sessions you plan to attend:

Sessions _____

amount due \$ _____

Individual Tutorials

September 26 only

Includes your choice of tutorials and their handouts; does not include any sessions or full conference proceedings.

By August 26-\$245 each

After August 26 & onsite-\$295 each

Please indicate by number which tutorials you plan to attend (maximum of 3):

Tutorials _____

Number of tutorials x \$ _____

= amount due \$ _____

Individual Sessions

September 27-29

By August 26-\$165 each

After August 26 & onsite-\$195 each

Please indicate by number which sessions you plan to attend (maximum of 6):

Sessions _____

Number of sessions x \$ _____

= amount due \$ _____

The Spirit of Innovation Luncheon

September 28

Includes lunch and Keynote Address by Dr. Yasuhiro Ota of Toyota
Free with Strengthening Industry Pass or Conference Sessions Only Pass; for all others:

By August 26-\$35

After August 26 & onsite-\$40

Number of lunch tickets x (ticket price) \$ _____

GRAND TOTAL \$ _____

1 My job title/function is (select only one):

A. Corporate Management

B. Manufacturing Management

C. Manufacturing Engineering

D. Production Management

E. Production Engineering

F. Process Control Engineering

G. Educator

H. Research and Development

I. Sales and Marketing

J. Other—please specify: _____

3 My company is (Please select option that most closely matches):

A. OEM

B. System Integrator

C. End User

D. Robot Supplier

E. Vision Supplier

F. Consulting Firm

G. Government Facility

H. Research Lab

I. University

J. Other—please specify: _____

4 What is your purchasing authority for robotics and/or machine vision products (check one):

A. Recommend

B. Specify

C. Approve

D. Not Applicable

5 Please indicate if your company currently uses:

A. Robots

B. Machine Vision

C. Neither

2 My company's primary industry is (select only one):

A. Aerospace

B. Appliance

C. Automotive Manufacturer

D. Automotive Supplier

E. Consumer Goods

F. Defense/Military

G. Education

H. Electronics

I. Food & Beverage

J. Furniture

K. Medical Devices

L. Off-road Vehicles

M. Paper/Printing

N. Pharmaceuticals

O. Plastics

P. Semiconductor

Q. Textiles

R. Other—please specify: _____

6 Please indicate if in the next six months your facility plans to purchase:

A. Robots

B. Machine Vision

C. Unsure

D. Neither

Method of Payment Prepayment is required for conference registrants.

Check enclosed (in U.S. funds, drawn on a U.S. bank, payable to "RIA")


Credit Card

American Express MasterCard VISA Discover

Number _____ Exp. Date _____

Name on Card _____

Authorized Signature _____

Please return with payment to:  Robots & Vision Show, P.O. Box 3724, Ann Arbor, MI 48106
For faster service, fax to (734) 994-3338
Questions? Call (734) 994-6088

You also can register online at:  www.robots-vision-show.info

No charge for cancellations received prior to September 19, 2005. No charge for substitutions at any time. Cancellations received after September 19, 2005 will result in a \$50 cancellation fee. No refunds for cancellations received after September 26, 2005.