



## Letter of Invitation/Support/Confirmation Request

Please complete one form per person per event and submit to  
[registration@imaging.org](mailto:registration@imaging.org) using Subject line:  
Visa Request-[Conference name] [Family Name], i.e., Visa Request-CIC30 Chen)

Please note: Letters of Invitation for authors are provided for speakers traveling to IS&T meetings held in US locations. Letters of Support for authors are provided for IS&T meetings held in other countries. For attendees, IS&T issues Letters of Confirmation of Registration for IS&T meetings held in the US or other countries.

1. Conference:  Color and Imaging (CIC)  Archiving  Other: \_\_\_\_\_ Year: \_\_\_\_\_
2. Are you a  Presenting Author  Author on a paper being presented  Attendee only\*  
\*Attendee only must be registered for the event before a letter of confirmation is issued
3. Have you registered for the conference  Yes  Not yet
4. For authors: Paper Number(s): \_\_\_\_\_
5. For authors: Paper Title(s): \_\_\_\_\_
6. Date of Birth (day/month/year): \_\_\_\_\_
7. Passport Number and Issuing Country: \_\_\_\_\_
8. Gender: \_\_\_\_\_
9. Nationality: \_\_\_\_\_
10. Full Name: *(must match the spelling on your passport)*  
Prefix: (Dr., Prof., Mr., Ms., etc.) \_\_\_\_\_  
First (Given) Name: \_\_\_\_\_  
Middle Name or Initial: \_\_\_\_\_  
Last (Family) Name: \_\_\_\_\_  
 Check if spelling of name is different than that used in papers submitted to this conference
11. Email: \_\_\_\_\_
12. Mobile Number: \_\_\_\_\_
13. Any additional Information: \_\_\_\_\_

All letters will be sent by **email** (as a PDF attachment).

Check box if you also need a hardcopy mailed or faxed to you and provide needed information below.

Mail Invitation Letter To:  Home Address (recommended)  Business Address

Business or University Name: (business address only) \_\_\_\_\_

Department and/or Office Number: (business address only) \_\_\_\_\_

Street Address (include Number, Street, Apartment/Unit): \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_ Fax #: \_\_\_\_\_

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