

2008 Registration Form
6th Annual
Short Course and Workshop
on Computer-Assisted Image Analysis
and Measurement



Instructor: Dr. John C. Russ

Tuesday June 24 – Friday June 27, 2008
University of Missouri Columbia, MO 65211

REGISTRATION INFORMATION:

Name: _____ **Phone:** _____

Company: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Email: _____

REGISTRATION FEE: \$1400*

Includes: 500 page Image Analysis Tutorial CD with 300 images and course notes; ½ day Introduction to Adobe Photoshop; a 30 day trial version of Fovea Pro 4.0 and 20% discount off the list price; all lunches and coffee breaks, a dinner banquet and opening reception; CEU credits.

METHOD OF PAYMENT: **CHECK**, payable to: University of Missouri

CREDIT CARD: **MasterCard** **Visa** **Discover**

Credit Card # _____ **exp. date** ____ / ____

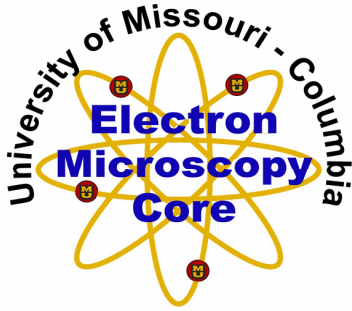
Cardholder Signature _____

Cardholder Name (if different than registrant) _____

TO REGISTER

- By mail send this form with a check or credit card information to:
Lou Ross, W136 Vet. Med. Bldg., University of Missouri, Columbia, MO 65211 -or-
- If paying by credit card, fax this form to: Lou Ross at (573) 884-2227 -or-
by email to rosslm@missouri.edu.

* Cancellation policy: Full refund if cancelled by May 24, 2008; 50% refund after May 24, 2008.



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IMAGE INFORMATION (TYPE: SEM LM, ETC and description)

IMAGE PROCESSING AND ANALYSIS, DATA EXTRACTION, MEASUREMENT NEEDS