

Registration Information

SPIE. PHOTONICS INDUSTRY SUMMIT

18 September 2025

Ronald Reagan Building and International Trade Center
Washington DC, United States

CONFERENCE REGISTRATION

Your full conference registration fees include admission to all presentations, networking events, industry panel, and evening reception. Your registration fees also include participation in the Wednesday Congressional Reception, 17 September 2025—held the evening prior to the Summit.

Communications Preference and Acceptance of SPIE Policies

New data protection legislation has changed how SPIE can communicate with you. Note that unless you specifically opt in to receive information from SPIE, including information about this meeting, you will not be contacted. Please indicate your preferences on the form.

You must accept SPIE registration policies to attend this meeting; by submitting this form you indicate your acceptance. SPIE Event Policies (www.spie.org/policies) and SPIE Privacy Policy (www.spie.org/privacy-policy) apply to anyone who engages in any activity with SPIE.

Payment

This form will NOT be processed if check is not enclosed or bank payment information is not included. You may contact SPIE by telephone with credit card information.

Refund Policy for Preregistration

There is a \$75 service charge for processing refunds for conference or course registrations. Requests for refunds must be received by 5 September 2025; all registration fees will be forfeited after this date. Membership dues and special events are not refundable.

EMAIL, MAIL, OR FAX THIS FORM TO:

Email: customerservice@spie.org

SPIE, PO Box 10, Bellingham, WA 98227-0010 USA

Phone: +1 360 676 3290 | Fax: +1 360 647 1445 | spie.org/summit

SPIE Photonics Industry Summit

18 September 2025 • Washington DC, United States

| | | | | |
|-----------------------------|--|-----------------|--------------------------------------|-------------------|
| Name and Address | | | Communication Preferences (required) | |
| First / Given Name | | | Middle Initial | |
| Last / Family Name | | | | |
| Job Title | | | | |
| Company / Organisation | | | | |
| Department / Division | | | | |
| Address (include Mail Stop) | | | | |
| City | | State / Country | | Zip / Postal Code |
| Country | | Phone | | |
| Email Address | | | VAT Number (if applicable) | |

SPIE Membership—Join and save on your registration fees!

Member/Fellow ☐ 1 year: \$135 ☐ 3 years: \$350 ☐ Lifetime: \$995

Student ☐ 1 year: \$20 (Estimated graduation date: _____)

Early Career Member ☐ 1 year: \$55 ☐ 3 years: \$150 ☐ 5 years: \$250

Eligible for 5 years following graduation. (Graduation date: _____)

Included with Membership—Choose one Online Journal:

- ☐ Applied Remote Sensing
- ☐ Astronomical Telescopes, Instruments, and Systems
- ☐ Electronic Imaging
- ☐ Medical Imaging
- ☐ Micro/Nanopatterning, Materials, and Metrology
- ☐ Nanophotonics
- ☐ Photonics for Energy
- ☐ Optical Engineering

MEMBERSHIP TOTAL

\$ _____

REGISTRATION TOTAL

\$ _____

| Conference Registration | SPIE Member | Nonmember |
|-------------------------|--------------------------------|--------------------------------|
| Attendee | <input type="checkbox"/> \$300 | <input type="checkbox"/> \$470 |

Payment must accompany registration

TOTAL

\$ _____

Payment Method

☐ CREDIT CARD — Please contact SPIE to make credit card payments. SPIE accepts VISA, MasterCard, American Express, Diners Club, and Discover cards. Credit card payments will be converted to your local currency by your card company or bank (see <http://www.xe.net/ucc> to convert your total fees).

☐ CHECK # _____ Amount \$ _____ payable to SPIE.

☐ CASH \$ _____

☐ BANK PAYMENT Please reference PO# _____

For wire transfers and bank information, please contact SPIE at customerservice@spie.org.

REGISTRATION POLICIES

I understand and accept [SPIE Event Policies](#) and [SPIE Privacy Policy](#) and understand that I will receive information from SPIE pertaining to this event.

BE WELL AGREEMENT

For your safety, SPIE hosts its events in accordance with local and national health guidelines. By attending this event, I acknowledge that event attendance may require adherence to such guidelines. The most current guidelines are posted on the SPIE website.

EMAIL, MAIL, OR FAX THIS FORM TO:

Email: customerservice@spie.org
SPIE, PO Box 10, Bellingham, WA 98227-0010 USA
Phone: +1 360 676 3290 | Fax: +1 360 647 1445 | spie.org/summit