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| www.intact.digital | Intact Digital Ltd  Compass House, Vision Park  Chivers Way, Histon  Cambridge, CB24 9AD, UK  Tel: +44 01223 25 7990 |

Send the signed form to Intact Digital Ltd (IDL) at [accounts@intact.digital](mailto:accounts@intact.digital)

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| **User Registration IDL-USR-2020** |

*Please provide information about the user to be registered*

|  |  |  |
| --- | --- | --- |
| User | | |
| First name: | Middle: |  |
| Last name: | Other names: | |
| Business role: | Email: | |
| Tel: | Fax: | |
| Required start date: |  | |

|  |  |
| --- | --- |
| Organization | |
| Organization account: | *Please include Intact Digital Services account details* |
| Organization name: |  |
| Division/Department: |  |
| Team/Unit: |  |

|  |  |
| --- | --- |
| User address | |
| Street: |  |
| City/Country: |  |
| Post Code: |  |

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| **Software Library Services** |

*Please indicate activities that you need to perform using the Software Library account of your organization. For more information about the account contact accounts@intact.digital.*

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| Software Management | | |
| Software registration | Software upload | Software installation |

|  |  |  |
| --- | --- | --- |
| Software Use Digital Vault | | |
| Study reconstructions | Software testing | Vault access |

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| **Signature** |

*The form needs to be signed by a person authorized to open an account and request user accounts for Intact Digital services.*

|  |  |
| --- | --- |
| Full Name: |  |
| Role: |  |
| Signature: |  |
| Date: |  |