



License Agreement
Part 1: Account Activation Form

The Choice Reviews License Agreement is in two parts, this Account Activation Form (Part I) and the Terms of Use (Part 2). Your subscription to Choice Reviews is not complete without both documents.

In order to start your subscription to Choice Reviews please complete this Account Activation Form and submit it to the address shown at the bottom of the form. We will activate your account within forty-eight hours of receiving this document, and the activation date shall be considered the Commencement Date for billing purposes unless otherwise indicated below.

After you have submitted this form, please execute Part II, Terms of Use and submit it to the address shown on that form.

Customer Information

Are you subscribing through a subscription vendor? Yes [checkbox] No [checkbox]

If yes, please indicate agency name: _____

Licensing Institution: _____

Account Manager: _____

Mailing Address: _____

Country: _____

Email _____

Phone: _____ Fax: _____

[checkbox] Bill-to Address: Please check if billing address is the same as above.

Billing Contact Person: _____

Title: _____

Mailing Address: _____

Country: _____

Email _____

Phone: _____ Fax: _____

Site Licenses

Your license to *Choice Reviews* is a Site license. As defined in the License Agreement, a Site is (a) a building or geographically continuous campus having a single physical address, and (b) affiliated buildings or facilities located within the same city as the main campus. For the avoidance of doubt, branch campuses, regional campuses, extension campuses (for universities) or branch libraries (for public libraries) are considered separate Sites, *provided that they have separate physical libraries*. Those branch sites having separate physical libraries are subject to additional licensee fees on a per-Site basis.

Number of Sites to be licensed: _____ Region: United States Rest of World

Institution Type: College or University Public Library K-12 school library

Government Library Special Library Other

SITE ONE			
Institution Name _____			
FTEs (US colleges and universities only): _____		IPEDS# _____	
Site One Administrator (if different from Account Manager, above) _____			
Site One Mailing Address: _____			
_____			Country: _____

Email _____			
Phone: _____		Fax: _____	
IP Address: (Use a hyphen in the 4 th octet to indicate an IP range. Example IP: 123.45.678.150-255.)			
1 st Octet	2d Octet	3 Octet	4 th Octet

List IP(s) for Site One only. For additional IPs for Site One, please use a separate sheet.

SITE TWO

Institution Name _____

FTEs (US colleges and universities only): _____ IPEDS# _____

Site Two Administrator (if different from Account Manager, above) _____

Site Two Mailing Address: _____

_____ Country: _____

Email _____

Phone: _____ Fax: _____

IP Address: (Use a hyphen in the 4th octet to indicate an IP range. Example IP: 123.45.678.150–255.)

1 st Octet	2d Octet	3 Octet	4 th Octet

List IP(s) for Site Two only. For additional IPs for Site Two, please use a separate sheet.

SITE THREE

Institution Name _____

FTEs (US colleges and universities only): _____ IPEDS# _____

Site Three Administrator (if different from Account Manager, above) _____

Site Three Mailing Address: _____

_____ Country: _____

Email _____

Phone: _____ Fax: _____

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IP Address: (Use a hyphen in the 4th octet to indicate an IP range. Example IP: 123.45.678.150–255.)

1 st Octet	2d Octet	3 Octet	4 th Octet

List IP(s) for Site Three only.
For additional IPs for Site Three, please use a separate sheet

(use separate sheets if necessary for additional sites)

Commencement Date and Term

Your subscription shall begin on the date your account is activated (the Commencement Date) and shall extend through the one-year anniversary of this date. If you prefer another Commencement Date, please indicate below; we will activate your account on the date so written:

Please start my account on the following date: _____ (Leave blank if you wish the account to be activated immediately.)

License Fee

If you have a special offer code, please enter it here: _____

STEP ONE:

Email *Choice Reviews* customer service at support@acrchoice.freshdesk.com with the following information:

- Number of sites
- Institution type (see Site Licenses, above)
- Special offer code, if any

STEP TWO:

Enter the license fee provided you by our customer service representative in the space provided below.

As full payment for access to the Database at the Site(s) listed above for the Term and under the conditions set forth herein, Subscriber agrees to pay ALA in the amount of \$_____.

OFFICE USE ONLY:			
Sites: _____	Type Code: _____	Total FTEs: _____	Verified (initials): _____

Please sign and date below as indicated below:

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Name

Signature

Title

Date

Please send the completed Account Activation Form to Choice via email, fax, or surface mail, as shown below. Once your account has been activated, we will send an administrative username and password to the account administrator.

Choice Reviews Customer Service
575 Main Street, Suite 300
Middletown, CT 06457 USA
Phone: +1 860.347.6933 x 5 Fax: +1 860.346.8586
E-mail: support@acrchoice.freshdesk.com

After submitting this form, please complete and sign the Terms of Use at
<http://choice360.org/products/reviews/subscribe/crterms.pdf>

Your subscription to Choice Reviews is not complete without both documents.