



RESEARCH SERVICES: INSTITUTIONAL ACCOUNT REQUEST FORM

New clients from institutions must complete this form and fax or email it to CEN4GEN at 1-587-329-9566 or accounts@cen4gen.org prior to submitting your first service order. Please note that all fields on this form are required and must be printed clearly. Upon review, you will be assigned an account number. For research service orders, please include your assigned CEN4GEN institution account number to ensure accurate billing.

INSTITUTION NAME: _____

Section 1 – Authorized Billing/Business Office Contact Information

Contact Name: _____ Contact Title: _____

Department: _____

Phone: _____ Fax: _____ Email: _____

Billing Address 1: _____

Billing Address 2: _____

City: _____ Province/State: _____ Country: _____

Postal Code/Zip Code: _____

Signature: _____ Date: _____ (MM/DD/YY)

Section 2 – Billing Options

Preferred method of invoice receipt: Fax Email

Fax or Email where invoice should be sent if different than in Section 1: _____