



# TexPool Academy Log-On Request Form

Use this form to establish user names and passwords for TexPool Academy. Please complete a TexPool Academy Deletion Form if any users are to be deleted as soon as possible.

After the requested log-ons are created, a letter outlining the steps to connect along with the user name and password, will be sent to those authorized from TexPool Participant Services.

## 1. Participant Information

<input type="text"/>	<input type="text"/>
Location Name	Location Number
<input type="text"/>	<input type="text"/>
Primary Representative	Primary Representative Telephone Number
<input type="text"/>	<input type="text"/>
Primary E-mail Address	Fax Number
<input type="text"/>	
Mailing Address*	
<input type="text"/>	<input type="text"/>
City*	State*      Zip Code*

## 2. User Information

		Authorized Representative
<input type="text"/>	<input type="text"/>	Y <input type="checkbox"/> N <input type="checkbox"/>
Name of User (Enter exact name - first, middle initial, last)	User Title	
<input type="text"/>	<input type="text"/>	
E-mail Address	Telephone Number	
<input type="text"/>	<input type="text"/>	Y <input type="checkbox"/> N <input type="checkbox"/>
Name of User (Enter exact name - first, middle initial, last)	User Title	
<input type="text"/>	<input type="text"/>	
E-mail Address	Telephone Number	
<input type="text"/>	<input type="text"/>	Y <input type="checkbox"/> N <input type="checkbox"/>
Name of User (Enter exact name - first, middle initial, last)	User Title	
<input type="text"/>	<input type="text"/>	
E-mail Address	Telephone Number	
<input type="text"/>	<input type="text"/>	Y <input type="checkbox"/> N <input type="checkbox"/>
Name of User (Enter exact name - first, middle initial, last)	User Title	
<input type="text"/>	<input type="text"/>	
E-mail Address	Telephone Number	

