

FedEx Online eShipping Registration Form

(To be completed by the local administrator who wishes to grant shipping rights to a departmental user)

Department User Information

Department Administrator*: _____
Last *First*

E-mail Address: _____

User Name: _____
Last *First*

User ID
(MFA email address **without** ".edu"):

Phone : () _____

Department Information

Department Name: _____

Department Address: _____
Street Address *Suite #*

_____ *City* *State* *ZIP Code*

Phone: () _____ Fax Phone: () _____

Approver Information

PGA: _____
Last *First*

E-mail Address: _____

Department Oracle Number: _____

Phone: () _____

Signature: _____

Current Account Information

Current Account Information:

If you currently have a shipping account but it is not under the MFA FedEx Ship Manager Program, please list the account number(s) below. Balances on existing accounts will be brought over with the accounts. Note that existing account(s) will be rolled up to the FedEx Ship Manager Program.

_____	_____
_____	_____
_____	_____
_____	_____

***The Department Administrator is responsible for ensuring that all required information for the department is completed before submitting the form to Procurement. (Please note that Procurement will periodically purge the user list to keep it current, but it is the responsibility of the Department Administrator to notify Procurement when an individual user in their department must be added or removed.)**