# UPS Online eShipping Registration Form

(To be completed by the department 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 UPS Ship Program, please list 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 Master account.

     _____     _____
     _____     _____
     _____     _____
     _____     _____
     _____     _____

**\*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.)**