

# ObituaryRegistry.com Database Services

## ORDER FORM

### FOR UNIVERSITIES AND OTHER INSTITUTIONS WITH ALUMNI

Yes! I'd like to 1) \_\_\_\_ become an Annual Subscriber, or 2) \_\_\_\_ Renew my Annual Subscription, and receive my password to access ObituaryRegistry.com, featuring a national obituary/death notice database and a copy of the Social Security Death Master File. I certify that this subscription will be used to research records which apply directly to my college/university and understand that access to these databases is subject to the "Rules of Use" published on the website.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

By (Name and Title): \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

College/University: \_\_\_\_\_ Approx. Living Alumni: \_\_\_\_\_

Address: \_\_\_\_\_

Additional Contacts (optional):

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

#### Please CIRCLE YOUR RATE IN THE CHART BELOW. All fees are payable in advance:

Living alumni:	Less than 10,000	10,000 to 25,000	25,000 to 50,000	50,000 to 75,000	75,000 to 100,000	100,000 to 150,000	150,000 to 200,000	200,000 to 250,000	250,000 to 300,000	Over 300,000
Standard Monthly Rate Term: 1 year	29.95	47.95	62.95	79.95	94.95	114.95	134.95	154.95	174.95	195.95
Annual prepayment discount	5%	5%	5%	5%	5%	5%	5%	5%	5%	5%

**RECOMMENDED:** \_\_\_\_ Yes, in addition to my password access, send me a **weekly** email report. Include all new names whose records include any of the following "Keywords" search terms (*limit 4 terms*).  
**\$12/ month** – Annual prepayment discounts may be applied:

Examples of Keywords search terms: "Boston College", "University of South Carolina", "Fighting Irish", "Wharton School of Business", "UNC"

#### Credit Card Payment Information: (complete this section and fax to 888-287-3511)

Circle: Visa MC Amex Disc Card Number: \_\_\_\_\_ Exp: \_\_\_\_\_ CVV#: \_\_\_\_\_

Select one: \_\_\_\_ Charge my credit card \$ \_\_\_\_\_ each month for the term of one year.

\_\_\_\_ Charge my credit card one time for the discounted annual fee of \$ \_\_\_\_\_.

Name as it appears on card: \_\_\_\_\_

Credit card billing address: \_\_\_\_\_

#### Check Payment Information: (complete this section, fax to 888-287-3511 and then mail with check to address below)

Select one: \_\_\_\_ Enclosed is a check for \$ \_\_\_\_\_. Payments will be sent monthly for the term of one year.

\_\_\_\_ Enclosed is a check for the discounted annual fee of \$ \_\_\_\_\_.

#### Please make check payable to:

American Family Archives & Chronicles  
2120 58<sup>th</sup> Ave., Suite 101  
Vero Beach, FL 32966

**Please fax completed order form 1-888-287-3511**

Phone: 888-286-4006 Fax: 888-287-3511 Email: Support@ObituaryRegistry.com