

INFORMATION SCHEDULE PART FOUR CONTACT DETAILS

WHO SHOULD WE CONTACT REGARDING ADMINISTRATIVE ISSUES?	
NAME:	
ROLE:	
ADDRESS:	
EMAIL ADDRESS:	
PHONE NUMBER:	
FAX NUMBER:	
ALLOW THIS CONTACT TO ACCESS YOUR PORTAL?	
Note that an email address must be provided for portal access	
SEND THIS CONTACT A COPY STATEMENT BY EMAIL?	
Note that an email address must be provided for copy statements	
OTHER CONTACT (Optional):	
NAME:	
ROLE:	
ADDRESS:	
EMAIL ADDRESS:	
PHONE NUMBER:	
FAX NUMBER:	
ALLOW THIS CONTACT TO ACCESS YOUR PORTAL?	
Note that an email address must be provided for portal access	
SEND THIS CONTACT A COPY STATEMENT BY EMAIL?	
Note that an email address must be provided for copy statements	

Other Contact Details

OPTIONAL OTHER CONTACT:	
NAME:	
ROLE:	
ADDRESS:	
EMAIL ADDRESS:	
PHONE NUMBER:	
FAX NUMBER:	
ALLOW THIS CONTACT TO ACCESS YOUR PORTAL?	
Note that an email address must be provided for portal access	
SEND THIS CONTACT A COPY STATEMENT BY EMAIL?	
Note that an email address must be provided for copy statements	
OPTIONAL OTHER CONTACT:	
NAME:	
ROLE:	
ADDRESS:	
EMAIL ADDRESS:	
PHONE NUMBER:	
FAX NUMBER:	
ALLOW THIS CONTACT TO ACCESS YOUR PORTAL?	
Note that an email address must be provided for portal access	
SEND THIS CONTACT A COPY STATEMENT BY EMAIL?	
Note that an email address must be provided for copy statements	

SIGNED:	DATE:
PRINT NAME:	
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