www.facts4me.com Basic School Subscription

Name of School:	
	State: Zip code:
	State:
	udent Population: Number of Teachers:
Basic School Subscription: \$50 for 12 months	
Contact Person's E-mail Add	Iress: dress confirming your subscription, including your school's User ID and Password.
Contact Person's Full Name	::
Log-in information	
(ID and Password: a <u>minimum</u> of 3 letters or a combination of 3 letters/numbers.) Student access is 8 a.m. to 5 p.m., Monday through Friday for 12 months.	
Preferred Log-in User ID: _	(case sensitive)
Preferred Log-in Password:	(case sensitive)
Purchase Order Number	
OR Mastercard	Visa
Credit card number:	
Expiration month:	year: Security digits:
Name on Card	
	ess the same as the school address? yesno
	·
If not: Street address	
City	State Zip
I have read the fol	lowing terms and accept them:
during normal school hour time, Monday through F	In provides access for all students and staff in one school is. The activation time is 8:00 a.m. to 5:00 p.m. , your local riday , for 12 months. The User ID and Password may be staff. If requested, the activation time may be adjusted to hool.
Signature:	Date:

FAX NUMBER: 630-515-0054