



BLACKSBURG
electronic village

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Community Connections Application

Applicant

Contact Name		
Group Name		
SSN/TaxID/FRS (required for billing)		
Street Address or P.O. Box		
City, State, ZIP		
Contact Phone	(H)	(W)
Notification e-mail:		

Account

1	Name of Web site (http://civic.bev.net/xxxx)	
2	E-mail Account #1 xxxx@bburg.bev.net	username: _____ password: _____ mail forwarding: _____
3	E-mail Account #2 (optional)	username: _____ password: _____ mail forwarding: _____
4	Listserv Name	

Instructions

BEV Community Connections accounts are provided with one (1) Web address, two (2) E-mail accounts and one (1) mailing list. Follow the instructions below for filling in account information.

1 Fill in the name of your requested Web address where **xxxx** is indicated. Your Web address will be http://civic.bev.net/ourchurch/ as an example.

2 Choose a **username** such as **ourchurch** or **lionsclub** in place of **xxxx**. Your E-mail address would be **ourchurch@bburg.bev.net**. Choose a password (**must be 6-8 characters in length with at least 1 non-alphabetic character**). Enter an address that you want this E-mail account forwarded to if different from the one being created. (*Mail forwarding is optional*).

3 A second E-mail account is available and optional. Follow the directions in step two to fill out the necessary information.

4 Enter the name of your E-mail mailing list where **xxxx** is indicated. This can be any length and it is recommended that it be the same as your Web address, but not required. Your mailing list name cannot be identical to either of your e-mail addresses. Your mailing list address would be **ourchurch@listserv.bburg.bev.net**

Billing \$20/year

(Billing address only if different from above)

Group Name	
C/O Street Address or P.O. Box	
City, State, ZIP	

Signatures

I am assuming all responsibility for all activity associated with this Community Connection account. I have read the policy on *Acceptable Use of Information Systems at Virginia Tech* and I understand fully and agree to abide by the principles and guidelines it contains.

Applicant signature

Date

Parent or guardian signature if applicant is under 18 years of age

Office Use	Initials	Date
<input type="checkbox"/> Entered in Contact db		
<input type="checkbox"/> Account created USERID1: _____ USERID2: _____		
<input type="checkbox"/> Web-site setup		
<input type="checkbox"/> Test index loaded		
<input type="checkbox"/> Listserv setup		
<input type="checkbox"/> Customer notified		
<input type="checkbox"/> Created Work db #		
Customer ID #		
Sales ID #		
Notes:		