

Germania Mutual Members' Site Registration Form

Po Box #30 403 Mary St., Ayton Ontario N0G 1C0 1-519-665-7715 or 1-800-265-3433

Please PRINT clearly.

- A separate registration form must be completed by EVERY PERSON (User) that requires access.
- The Company Information and User Information must be completed in full. The addition must be authorized by the company manager.
- The user and witness must sign the security agreement.
- Fax completed form to **519-665-7558** or email to <u>it@germaniamutual.com</u>.

Company Informati				
Company N	ame:			
		Fax:		
User Information:	Add User	Change User	Delete User	
Name:				
Title:				
Email:				_ (Please Print)
		Ext:		
Authorization:	Check all that apply	y: Producer/CSR Gene Broker/Agent Princi		
Manager's N	lame:			
Manager's S	ignature:			
Date of Requ				

Manager: You MUST notify Germania of any employee who no longer works for the brokerage/agency.



INFORMATION and SYSTEM SECURITY AGREEMENT

In consideration of Germania allowing my authorized access to its Member Area, I understand and agree, that:

- I will not disclose to any person my User ID(s) as assigned by Germania or my password(s);
- I will treat as confidential any information of Germania and not disclose such information to any other party unless specifically authorized by Germania, or such information is publicly available;
- I will not, to the best of my knowledge, through the use of the computer facilities of Germania, infringe or violate the patent, copyright, license or propriety right of any third party;
- I will immediately advise Germania of any misuse of the computer and communications resources, the software or information relating to or contained in Germania facilities of which I become aware;
- I will take all reasonable steps to prevent any pirated software, computer viruses and destructive programs from entering into any of the computer and communication resources of Germania;
- I will not access, alter, destroy or copy any software or information relating to or stored in the computer facilities of Germania unless specifically authorized by Germania;

I have read and I understand the security policies stated above and will comply with them. I understand that the failure to comply with the security policies may result in action by Germania.

	lersigned has executed this Agreement f 20
Name: Signature:	Company:
I have witnessed the signature of name above.	
Name:Signature:	Company:Date: