



# BCLabNet New Account Request Form

\* Please print this page, complete, and fax it to us @ 661.327.1918\*

## Client:

### Account Admin

Login Name: \_\_\_\_\_

Login Password: \_\_\_\_\_

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

## Document ID [1]:

### User 1

Login Name: \_\_\_\_\_

Login Password: \_\_\_\_\_

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

### User 2

Login Name: \_\_\_\_\_

Login Password: \_\_\_\_\_

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

### User 3

Login Name: \_\_\_\_\_

Login Password: \_\_\_\_\_

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

### User 4

Login Name: \_\_\_\_\_

Login Password: \_\_\_\_\_

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

### User 5

Login Name: \_\_\_\_\_

Login Password: \_\_\_\_\_

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

## Notes:

**1** Document ID will be given to you when you contact one of our Client Services Representative.

**2** The **Account Admin** is the authorized contact person when new users are added or modified.