

IGeLU REGISTRATION FORM

You are kindly requested to fill in all applicable fields

Institution	
Institution Name	
VAT code	
Address	
Postal code	
City	
State code (if applicable)	
Country	
Homepage URL	
Discovery URL	
Contact Person for Invoicing	
Ms./Mr.	
First Name	
Last Name	
Phone	
Email	
Contact Email for Voting	
Email	

- On behalf of the institution named above, I declare that this institution will become a member of IGeLU (International Group of Ex Libris Users). I have read the [Statute of IGeLU](#) and agree on it. I know that membership is valid only after the annual membership fee (EUR 300.00) has been paid.
- My institution has never before registered as an IGeLU member and is therefore entitled for the complimentary current year's annual membership.

My Institution has contracted the following Ex Libris (part of Clarivate) products:

- | | | | |
|---------------------------------------|-----------------------------------|-----------------------------------|---|
| <input type="checkbox"/> 360 Products | <input type="checkbox"/> Aleph | <input type="checkbox"/> Alma | <input type="checkbox"/> Alma-Digital |
| <input type="checkbox"/> CampusM | <input type="checkbox"/> CDI | <input type="checkbox"/> Converis | <input type="checkbox"/> EndNote |
| <input type="checkbox"/> Esplo | <input type="checkbox"/> Intota | <input type="checkbox"/> Leganto | <input type="checkbox"/> Library Mobile |
| <input type="checkbox"/> MetaLib | <input type="checkbox"/> Primo | <input type="checkbox"/> Rialto | <input type="checkbox"/> RapidILL |
| <input type="checkbox"/> Rapido | <input type="checkbox"/> RefWorks | <input type="checkbox"/> Rosetta | <input type="checkbox"/> SFX |
| <input type="checkbox"/> Summon | <input type="checkbox"/> Voyager | | |

Date :

Signature and company stamp:

You can download your annual fee invoice once you are registered and received login credentials