



722 N California St
 Socorro, NM 87801
 Phone: (505)-838-1620
 (866)-838-1620
 Fax: (505)-838-2418

Dial-Up Application Form

Contact Information:

Name: _____
 Business: _____
 Address 1: _____
 Address 2: _____
 City: _____ State: _____ ZIP: _____
 Phone #: _____ Fax #: _____

To use the service, you must specify a username. This is the username that you will use to dial-up to our service and it will be your primary email address – the email address that your billing notifications and other important SDC notices will be sent to. For example, if you want your username to be “bob”, your email address will be “bob@sdc.org”.

Usernames can only be lowercase, alphanumeric (letters & numbers), must start with a letter, and cannot be longer than 8 characters. If the username you request is already in use you will be notified so you can make another choice.

Passwords can be any length and can consist of any key you can enter on the keyboard. To help keep your account secure we require that passwords be at least 6 characters, and must be a combination of letters, numbers, or symbols. For example, “bird” is not a valid password, but “b1rd4#” is.

Username: _____ Password: _____
 Email Address #2: _____ Password: _____
 Email Address #3: _____ Password: _____
 Email Address #4: _____ Password: _____
 Email Address #5: _____ Password: _____

(Additional emails are not required at time of sign-up, and can be added anytime)

Type of Service:

<u>Account Type</u> <small>(Check One:)</small>	<input type="radio"/> <u>Monthly</u> <small>(standard price)</small>	<input type="radio"/> <u>Quarterly</u> <small>(discount)</small>	<input type="radio"/> <u>Annual</u> <small>(discount)</small>
Basic Dial-Up:	\$21.32	\$59.16	\$217.38

(All prices include 6.875% sales tax)

In signing below, I certify that the above information is correct and that I agree to abide by the terms and conditions of the TERMS OF SERVICE AND ACCEPTABLE USE POLICY, a copy of which I have received. I also understand that failure to abide by those terms and conditions may be cause for termination of service. Furthermore, I understand that I will be responsible for the purchase and maintenance of my own dial-in line(s) to SDC, my routing, connectivity and storage equipment and software used.

Signature: _____ Date: _____ SSN*: _____ Birthdate*: _____

(* Social security number and birthdate are used for credit purposes. If you chose not to provide this information your account may be suspended immediately without notice if payment for subsequent periods of service is not received promptly on the due date.)