

**Customer connect  
Registration Form**

**CUSTOMER CONNECT REGISTRATION FORM - STARCYL CYLINDERS**

To register to STARCYL'S CUSTOMER CONNECT, please complete this form and fax to: **630-282-7142**.  
Important note: a form must be filled for every person who will have access to this tool.

***Company Information***

Company Name:

Address:

City:  State:  Country:

Postal Code:  Phone:  Fax:

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***Individual Information***

Name:  Title:

Phone:  Fax:

e-mail:

Please provide your own individual company e-mail address. Shared e-mail addresses cannot be processed.

Applicant's  
Signature: \_\_\_\_\_

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***Executive Authorization***

Senior manager's name:  Phone:  Fax:

Senior manager's signature: \_\_\_\_\_

Print the form and have a senior manager sign it confirming your authorization to have access to all information related to your Starcyl's account.

<b><i>For Internal Purposes Only</i></b>			
Customer Account No.:	<input type="text"/>	Approval:	_____