



# VIRRGIN ADMINISTRATOR REGISTRATION

Virtual Integrated Registry and Regulatory General Information Network  
(VIRRGIN)

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**Request User ID** (Alphanumeric, max 10 characters)

- Existing User ID**
- New User ID**

**Title:**

- Mr.     Mrs.     Miss

**Last Name**

**First Name**

**Job Title**

**Email Address**

By signing this Declaration, I indicate that I have read, understood and agree to abide by and be bound by the General Terms and Conditions set out in the Terms and Conditions of Use (Authorised Users) agreement and any other supplemental guidelines and policies between the Commission and the Subscriber by whom I am employed.

**User Signature**

(PRINT NAME)

(Signature)

**Director Declaration**

By signing this Declaration, I indicate that I have read, understood and agree to abide by and be bound by the General Terms and Conditions set out in the User Agreement and any other supplemental guidelines and policies between the Commission and the Subscriber by whom I am employed. I authorise the appointment of the above mentioned person in the capacity of administrator, and understand the rights and authority of the position.

(PRINT NAME)

(Signature)

**Signatory Date**

(DD/MM/YY)