

## AAF Subscription Form

### Applicant Organisation

Full name of organisation seeking to subscribe to the AAF

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Nature of organisation's business in the research and education sector

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Australian Business Number (ABN) or Company ACN

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Organisation's Physical Address

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### Primary Representative (the person authorised by the Organisation to act on its behalf)

Full Name

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Position Title

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Email Address

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Phone Number

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Address (if the same as above, write "as above")

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### Billing Details

Name / Department

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Direct Phone

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Email Address

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### Additional contact information

Product and Services Manager's Name

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Email Address

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Phone Number

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Technical Support Administrator

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Email Address

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Phone Number

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End User Support Department

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Generic Email Address

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Phone Number

### Subscription Plan

(Please select one option and only answer the relevant question/s)

If you are unsure which to choose, visit [www.aaf.edu.au/subscribe/aaf-subscription-fees/](http://www.aaf.edu.au/subscribe/aaf-subscription-fees/)

AAF Enterprise

Enter total number of full-time equivalent (FTE) staff members:

+ Rapid Enterprise (for hosted solution) – (please sign both declaration sections below)

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AAF Team

Enter total number of users to be presented to the Federation:

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Rapid Starter

Enter total number of users to be presented to the Federation:  
(please sign both declaration sections below)

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AAF Publisher

Name of service/s:

Describe the profile of your company, size, services or product areas and customers:

Describe your commercial intent and/or proposed use of the Federation:

Display an example or references of your service/s in other client organisations (if possible, at least one of those from the higher education and research sector and one other):

### Declaration

I have read the **Federation Rules** and if my application is approved by the Australian Access Federation, I agree that my organisation will be bound by the Federation Rules as amended from time to time.

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Signature of

Date

Primary Representative

(electronic signature is acceptable)

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I have read the **AAF Cloud Services Terms & Conditions** and if my application is approved by the Australian Access Federation, I agree that my organisation will be bound by the AAF Cloud Services Terms & Conditions as amended from time to time.

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Signature of

Date

Primary Representative

(electronic signature is acceptable)

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Send completed form via email to [enquiries@aaf.edu.au](mailto:enquiries@aaf.edu.au)