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**User** shall send a signed copy of this agreement to LDC (1) by email to ldc@ldc.upenn.edu or (2) by facsimile, Attention: Membership Office, +1 215-573-2175.

The Signature of an authorized representative of **User** is an acknowledgment of **User**'s obligations as described above.

_____________ _______________               _______________                            _______________
Printed Name                                      Signature                            Date

Name of Organization: ______________________________
Phone Number: ____________

Mailing Address: ____________

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