

Georgia Technology Authority Pager Order Form

Form GTA 01-2004

Request Date _____

Agency: Valdosta State University
Address: 1500 North Patterson Street
City, State, Zip: Valdosta, GA 31698
Contact Person for Order: _____

User Name _____

User Phone Number

() - _____

ProPage Account Number

100576

Contact Phone Number

() - _____

Contact E-Mail

To activate new service complete the following:

Number of units requested: _____

Type of service requested: Numeric-GA Plus Alphanumeric-GA Plus Alphanumeric-Nationwide
 Numeric-Nationwide Alphanumeric-1.5 Alphanumeric-2 Way

Phone number exchange requested: Valdosta

Optional Services: Voice Mail Custom Greeting None

To request a replacement for or to terminate service on an existing unit complete the following:

Pager phone number:

Check one: Replace-Broken Replace-Lost/Stolen Terminate service

Existing Equipment Information (if available): Capcode _____ Serial Number _____

Is this unit a member of a group page: Yes No

If Yes, check one of the following:

New Group Existing Group-Enter group master number:(____)_____-_____

Delivery Information:

Street Address _____

Name and phone number of delivery site contact: _____ (____)_____-_____

Delivery date requested: _____