

# Merchant Online Enrollment Form

**Please complete and fax to 1-800-434-8616**

I would like to have the ability to view my credit card processing activity and monthly statements online. I understand that there is a monthly fee of \$5.00 associated with this ability.

**Date of Request:** \_\_\_\_\_

**Name(s) of Business:** \_\_\_\_\_

**Merchant Number(s):** \_\_\_\_\_

Name of individuals that will need access

	<b>First Name</b>	<b>Last Name</b>	<b>e-mail address</b>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____

By signing below, I authorize Member and Global Pay to allow the individuals listed above to have online access to my processing activity.

**X** \_\_\_\_\_  
Merchant Signature (request for service must be signed by owner/same name that appears on the application)

After faxing in your paperwork you should receive an e-mail confirmation that you are now able to view your account on line. Enclosed in the e-mail will be your User name and Password. Please allow 5 days to receive your log-in instructions.