



Identity Provider Registration Request¹

(RET 3511	w S New	v 2.1, 2014/04 Change Req		Removal
		- ,		
	Name:	Organizatio しいいうたいてA	in BULA TUSAA	<u> </u>
	EntityID³:	Service	-PROD-CINECA.I	T/IDP/SHIBBOLETH
	eduGAIN opt-out⁴			
	Name: Position:	Technical Com MAURILLO MEN RESR. UFFICEO R		
	Address:	LARGO UNIVERSITA		
	Email:	MEC @ UNITUS I	T	
	Phone:	0761 354766		
	Name:			
	Position:		·····	
	Address:			***************************************
	Email:			
	Phone:		***************************************	
	Support Email ⁶ :	MBPHAZIER GONI	TUS. IT	
	The service is in compliance with the purpose of the Federation. Date: 23-02-2015 Applicant's signature PAOLO MARCANTONIO			
	Applicant's signature 1.199 1976 1970 1970			
	Acceptance by Consortium GARR			
	Date: On behalf of Consortium GARR			

NOTE: if this is the first service registration you must also fill the form to join the Federation as a Member or as a Partner. If you tick "Change", please fill only in the fields you want to change; leave others blank

3 Unique identifier which identifies each Service in IDEM Federation

5 At least one is required.

6 Email address operating also during the absence of the Technical Contact.

¹ The form can be filled in Italian or in English. Please send two originals to Consortium GARR, Servizio IDEM GARR AAI, Via dei Tizii,6 00185 Roma and email a copy to idem@garr.it

⁴ By default when you register the IDP in IDEM Federation, your IDP will automatically registered also in eduGAIN interfederation. EduGAIN opt-out means you explicitly require that your service be excluded from eduGAIN metadata.

⁷ Signature of the "Referente Organizzativo" or of the Organization's Legal Representative The signature must be readable or Name and Surname in block capitals must be written down. In case of a "change request", a signature of the technical contact person or of the Technical Representative is sufficient.