





Identity Provider Registration Request¹ v 2.3, 2015/10/07

	☑ New	☐ Change²	□ Removal
		Organizatio	
Name:	.Centr	o di Riferimento Oncol	ogico di Aviano
Service			
EntityID ³ :		//idp-cro.irccs.garr.it/id	p/shibboleth
eduGAIN opt-out⁴			
		Technical Cont	acts⁵
Name:	Rob	erto Ricci	
Position:	Net	work System Admin	
Address:	Via	a F.Gallini 3 33081 A	wiano
Email:	rr	icci@cro.it	
Phone:	04	34-659369	
Name:			
Position:			
Address:			
Email:			
Phone:	***************************************		
Support Email ⁶ :	se	ervinfo@cro.it	
The service is in compliance with the purpose of the Federation.			
Date:16/02/201	.6		
Applicant's signature ⁷			
Acceptance by Consortium GARR			
Date:			
0.80 20		onsortium GARR	

Please send to: idem@garr.it

NOTE: if this is the first service registration you must also fill the form for joining the Federation as a Member or as a Partner.

The procedure should be carried out only by email, it is not required to submit any hard copy.

2 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 - Mandatory

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

5 At least one is required.

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

7 Please sign digitally or alternatively with original signature and stamp 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.

¹ The form can be filled in Italian or in English.