



# INN MANAGEMENT SYSTEM ENROLLMENT FORM

Inn Name: \_\_\_\_\_ Date: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Inn ID: \_\_\_\_\_

**Primary Administrative Contact:**

Name: \_\_\_\_\_ Inn Leadership Position: \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

*The following executive committee members automatically have access to the Inn Management System (IMS): President, Vice President, Counselor, President-Elect, Secretary, Treasurer, Secretary/Treasurer, Administrator, Web Administrator, and Executive Director.*

**You may designate additional individuals for IMS access:**

	<b>Name</b>	<b>Inn Leadership Position</b>	<b>E-mail</b>	<b>Phone</b>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____

**OPTIONAL Online Credit Card Payments:** *Please initial if the Inn would like to accept online credit card payments.*      **Initials:** \_\_\_\_\_

As a representative of my Inn, I hereby authorize the American Inns of Court to establish the online credit card payment process for my Inn. I understand and agree to the following terms and conditions:

- Member payments by credit card will be processed through the American Inns of Court Foundation’s credit card merchant
- Each transaction will be assessed a fee of 2.2% plus .30¢ (subject to change)
- The net sum of payments collected (i.e., total transactions less the transaction fee) will be distributed to the Inn on a monthly basis
- Refunds for transactions that were initially paid by credit card must be issued by the Inn by check; refunds may not be issued to credit cards
- Funds to Inns will be distributed by ACH. Please provide the following information for your Inn’s bank account:  
Account #: \_\_\_\_\_ Bank Routing #: \_\_\_\_\_  
Notification e-mail: \_\_\_\_\_

Does your Inn utilize its website hosted by the American Inns of Court?      Yes      No

Does your Inn have a website not hosted by the American Inns of Court?      Yes      No      URL: \_\_\_\_\_

**Terms & Conditions:**

The American Inns of Court Foundation provides the Inn Management System (IMS) as a service to chartered American Inns of Court. Usage of the IMS by an Inn is subject to proper enrollment by the Inn and acceptance of any terms of use that may be in effect. Terms of use may change. The complete terms of use and privacy statement is available on our website at [www.innsofcourt.org](http://www.innsofcourt.org).

**Applicant Information:**

Name: *Please print* \_\_\_\_\_

Inn Leadership Position: \_\_\_\_\_

Signature: \_\_\_\_\_

**OFFICE USE ONLY:**

Date Received: \_\_\_\_\_ Date Entered: \_\_\_\_\_

Date Trained: \_\_\_\_\_ Trainer: \_\_\_\_\_

**PLEASE RETURN THIS COMPLETED FORM TO YOUR CHAPTER RELATIONS DIRECTOR.**