## **Digital Activation Form**

Sadlier, Religion

(District Orders Need to Complete One Form PER School or Parish) Please submit to **CustomerService@Sadlier.com**. Licenses will be activated directly by Sadlier. **CALL** 800-221-5175 **FAX** 212-312-6080 **EMAIL** CustomerService@Sadlier.com

Date:	Sadlier Order Number:	rder Number: or P.O. No:		
School/Parish informa	ation for digital activation			
Name of School:				
Address:				
City:		State:	Postal Code:	
Administrator for digit	tal product (will receive welcome ema	ail from <i>SadlierConnect</i> ™)		
First Name:		Last Name:		
Email:				
Phone Number 1:		Phone Number 2:		
Preferred appointmen	t time for training of administrator			
_		Time:		
All licenses are for 1 ye	ear.			
ISBN/Product Code	Name of Product and Grade Level		Quantity**	Desired Start Date**