

## **MyABEL Account Registration**

Please complete this form and Fax it to us at 866-337-5558

OR Email it to registration@abelsoft.com

MyABEL provides access to a variety of resources and services that are available through a secure login-based portal. ABELSoft customers must first register a Master User Account to gain access to these resources and to grant managed access to others in your practice.

The Master User Account has complete access and permission to all features of the practice's MyABEL account which include but are not limited to; the ability to purchase products online, download product updates, access customer account information and grant others access to your MyABEL account.

For security reasons, the Master User Account holder should be the individual who is the current ABEL product license owner, or a person whom the license owner has authorized to register as the Master User Account holder.

Please provide the following information to register for your MyABEL Master User Account:

ricuse provide the following		
Customer Information: Practice Name:		ABEL Client ID:
Master User Account holde First Name:		Last Name:
Tilst Nullic.		Lust Nume.
Email Address:		
(We suggest that you select a	an email address tha	at is private and not shared by others in your practice.)
ls th	is person the curren	nt ABEL product license owner?   Yes
If No:		
I, the cui	rent ABEL product l	license owner, authorize to be registered as the
Master User Account holder	for my practice.	
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ABEL Product License Own	er Signature:	
•		re acknowledging the information on this form is complete and nly be created once a signed registration form has been received by
(print) First Name	Last Name	Signature
Date:		
A temporary account passwonew password the first time y		o the address stated on this form. You will be required to create a vABEL Master User Account.