

# Institutional Subscription Order Form

Please complete this form and fax or mail it to Plant Management Network.  
You may type your responses before printing.



Contact Name: \_\_\_\_\_

Contact Title: \_\_\_\_\_

Institution: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

ZIP/ Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

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

Please provide your I.P. Address Information:

\_\_\_\_\_  
\_\_\_\_\_

To ensure broad usage within subscribing institutions, PMN has no licensing restrictions.

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## Academic Institutions

Please contact me with information on being a PMN Partner. (Partnerships include full subscription access.)

Annual Academic Subscription for institutions offering doctoral degrees in disciplines served by PMN: \$2500

Annual Academic Subscription for institutions offering non-doctoral degrees: \$500

Annual Academic Subscriptions for High Schools: \$100

## Non-Academic Institutions

Please contact me with information on Non-Academic Institutional Subscriptions and PMN Partnerships.

## Plant Management Network

3340 Pilot Knob Road  
St. Paul, MN 55121, United States  
Toll-Free 1-800-328-7560  
Telephone: +1.651.454.7250  
Fax: +1.651.454.0766  
subscriptions@plantmanagementnetwork.org

**www.plantmanagementnetwork.org**

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## Preferred Method of Payment

**Payment Enclosed:** Make checks payable to the Plant Management Network in U.S. funds through a member bank of the U.S. Federal Reserve System.

**Universities in the U.S.A. may be billed.**  
We must receive a purchase order via fax or mail with contact name and phone number.

**Charge my:**

- VISA (13 or 16 digits)
- American Express (15 digits)
- Mastercard (16 digits)

Credit Card # \_\_\_\_\_

Expiration Date \_\_\_\_\_

Signature \_\_\_\_\_