



**EBSCO Alt-HealthWatch  
Subscription Form  
January 1, 2012 - June 30, 2013**

**Institution name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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

\_\_\_\_\_

**Contact person:** \_\_\_\_\_ **Email:** \_\_\_\_\_

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

**Authorizing signature:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Please choose (18-month subscription):**

- Alt-HealthWatch* including unlimited remote access at a cost of **\$1,000/Member**
- Alt-HealthWatch* including unlimited remote access at a cost of **\$1,500/Non-Member**

**For EBSCO to authenticate my library:**

- My IP address or address range (must be the same for every session) is:

\_\_\_\_\_

\_\_\_\_\_

- I do not have a static IP address; my library requires a username and password.

**A purchase order is attached to this form:**

- Yes
- No; my library does not require purchase orders

**Please return this form to LILRC:**

Long Island Library Resources Council  
627 N. Sunrise Service Rd.  
Bellport, NY 11713-1540

Or by fax: 631-675-1573

Attn: Min Liu

Long Island  
Library Resources Council

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