CDM+ Text Giving Enrollment Form

Organization Information

Upload this form to our File Depot at the link below. Once upload is complete, please email customerservice@suran.com to notify us that the form has been uploaded.

https://www.suran.com/file-depot/

DBA or Brand Name:	What type of legal form is the org?
Legal Company Name:	Privately Held Company
	Publicly Traded Company
Phone:	Nonprofit Organization
	Government
Address:	
	What type of number do you require?
City:	a toll-free number (eg.800, 877, 844, etc) at \$5/month
State/Province:	a local number at \$15/month*
Zip Code:	Tax Number/ID/EIN:
Country:	Email:
Privacy Policy	Website:
When registering for a text giving number you	
must provide a link to your organization's privacy	
policy. This policy can be generic and does not need to reference the CDM+ Text Giving service	
directly. For more information click here .	

Link to your privacy policy:

By signing this form I certify that I am an authorized representative of the above named organization. I agree to any disclosed fees for CDM+ Text Giving according to the terms and conditions published on help.suran.com.

Authorized Signature:

Print Name:

Date:

*Requires a \$75 setup fee.