



**Information Gateway Services  
(Kitchener-Waterloo Inc.)**

20 Hanson Ave., Unit 3  
Kitchener, Ont. N2C 2E2  
Tel: (519) 884-7200 or 824-2026

**Domain Name Transfer**

**Customer Information**

Company Name:	
Contact Name:	
Address:	
City:	Postal Code:
Phone :	Fax :

**Registrar Information**

<b>Registrar</b> :
(Example: Network Solutions, Tucows, Bulk Register, Register.com, etc.)
<b>Username/Account</b> :
<b>Password</b> :
(if used to create the account, upper/lower case is IMPORTANT)

**Authorization**

<b>Domain Name:</b>	
I have authority over the above domain and authorize the transfer of the above domain name from its current location to Information Gateway Services (Kitchener-Waterloo) Inc. using whatever means deemed best by IGS, including, but not limited to, sending e-mail with the identity of one of the existing contacts.	
Signature _____ Date _____	
Title _____	