

**UNITED STATES DISTRICT COURT
MIDDLE DISTRICT OF NORTH CAROLINA
ELECTRONIC FILING ATTORNEY REGISTRATION FORM**

This form is used to register for an account on the Middle District of North Carolina Electronic Filing System. Registered attorneys will have privileges to electronically submit documents and to view the electronic docket sheets and documents. By registering, attorneys consent to receiving electronic notice of filings as well as agreeing to file all documents electronically through the system. The following information is required for registration:

PLEASE TYPE

Mr. / Mrs. / Ms. (circle one)

First Name: _____ Middle Initial: _____

Last Name: _____ If appropriate circle one: Senior / Junior / II / III

Bar ID Number: _____

Are you currently in good standing to practice in the Middle District of North Carolina? (If registering to file by special appearance, skip this question.) Yes No

Firm Name: _____

Address _____

City: _____ State: _____ Zip Code: _____

Have you relocated to this address within the past year? Yes No

Voice Telephone Number: _____ Fax Number: _____

Internet E-Mail Address: _____

This court requires that you attend Electronic Filing training at a Federal Court before issuing you a login and password.

List court(s) where you have received Electronic Filing training: _____

If you have not attended training at another Federal Court, please contact the Training Specialist at (336)332-6003 to set up training.

Attorneys seeking to file documents electronically must be admitted to practice in the United States District Court for the Middle District of North Carolina, unless you are appearing by special appearance. If you are an attorney appearing by special appearance, LR 83.1(d) applies.

By submitting this registration form, the undersigned agrees to abide by all Court rules, orders and policies and procedures governing the use of the electronic filing system. The undersigned also consents to receiving notice of filings pursuant to Fed. R. Civ. P. 5(b) and 77(d) and Fed. R. Crim. P. 49(b)-(d) via the Court's electronic filing system as well as agreeing to file all documents electronically. The combination of user id and password will serve as the signature of the attorney filing the documents. Attorneys must protect the security of their passwords and immediately notify the court if they learn that their password has been compromised by an unauthorized user. This court requires an original signature when submitting this form.

Signature of Registrant

Date

Submit completed Registration Form to: United States District Court
Attention: ECF Attorney Registration
324 W. Market Street, Room 401
Greensboro, NC 27401