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UNITED STATES DISTRICT COURT  
FOR THE  
SOUTHERN DISTRICT OF INDIANA

**ELECTRONIC CASE FILING  
Attorney Registration Form**

This form shall be used to register for an account on the Court's Electronic Case Filing (ECF) system. Registered attorneys will have privileges both to electronically file documents, and to receive electronic notice of case activity for all cases assigned to the Electronic Case Filing system. The following information is required for registration:

First/Middle/Last Name: \_\_\_\_\_

Attorney Bar ID #: \_\_\_\_\_ State: \_\_\_\_\_

Firm Name: \_\_\_\_\_

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

\_\_\_\_\_

Voice Phone Number: \_\_\_\_\_

FAX Phone Number: \_\_\_\_\_

Primary E-Mail Address: \_\_\_\_\_

Secondary E-Mail Address: \_\_\_\_\_

Basis under which attorney is permitted to practice law in the U.S.D.C. for Southern Indiana (check one):

- Admitted in INSD       Pro Hac Vice       Government Attorney

If Pro Hac Vice or Gov't Attorney, indicate the cause number for which admission has been granted:

Cause Number: \_\_\_\_\_

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) via the Court's electronic filing system.

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1. This system is for use only in cases permitted by the *U.S. District Court for the Southern District of Indiana*. It may be used to file documents electronically for civil cases initiated in the Southern District of Indiana on or after July 1, 2002. Please contact Wendy Carpentier at (317) 229-3718, to schedule training.
  2. Pursuant to Federal Rule of Civil Procedure 11, every pleading, motion, and other paper (except lists, schedules, statements or amendments thereto) shall be signed by at least one attorney of record or, if the party is not represented by an attorney, all papers shall be signed by the party. An attorney's ECF login and password issued by the court, serves in part as the attorney's signature, per Local Rule 5.11. Therefore, an attorney must protect and secure the password issued by the court. If there is any reason to suspect the password has been compromised in any way, it is the duty and responsibility of the attorney to immediately notify the court. The Court will immediately delete that password from the electronic filing system and issue a new password.
  3. An attorney's registration will not waive conventional service of a summons and complaint, subpoena, or other judicial process; submit the client to the jurisdiction of the Court; or operate as a consent to accept service of pleadings, documents, and orders in actions in which such attorney has not entered an appearance. An attorney's registration will constitute a waiver in law only of conventional service of other non-process pleadings, documents, and orders in the case. The attorney agrees to accept, on behalf of the client, service of notice of the electronic filing by hand, facsimile or authorized e-mail.
  4. Attorneys must be active members of the bar of this Court to file pleadings electronically.

Please return this form  
with original signature to:

U.S. District Court, Southern District of Indiana  
Attn: CM/ECF Administrator  
46 East Ohio Street  
Indianapolis, IN 46204

\*\*\*Photocopies and faxes WILL NOT be accepted.

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Attorney's Signature

NOTE: The information below will be used to generate a unique Login for use in accessing the ECF system. Please provide a four-digit number that is easy to remember, such as the last 4 digits of your Social Security Number.

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First Initial of      Full Last Name      4 Digit Number (last 4 digits of SSN is suggested)  
First Name