

# PORTICO®

## INSTITUTIONAL PARTICIPATION AGREEMENT

(Please type or print clearly)

Licensee (Institution or System) Name: \_\_\_\_\_

Licensee Address: \_\_\_\_\_

Agreement Date: \_\_\_\_\_

**Contact Information:** *Please ensure this information remains current by providing regular updates.*

**Licensee Primary Contact:**

Attn: \_\_\_\_\_

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

Telephone: \_\_\_\_\_

Facsimile: \_\_\_\_\_

E-Mail: \_\_\_\_\_

**Licensee Billing Contact:**

Attn: \_\_\_\_\_

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

Telephone: \_\_\_\_\_

Facsimile: \_\_\_\_\_

E-Mail: \_\_\_\_\_

**Licensee Technical Contact:**

Attn: \_\_\_\_\_

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

Telephone: \_\_\_\_\_

Facsimile: \_\_\_\_\_

Email: \_\_\_\_\_

**Technical Information**

See Schedule A

The parties agree to be bound by this Institutional Participation Agreement, the Terms and Conditions of Use, available <http://www.portico.org/digital-preservation/terms-of-use>, and the Product and Payment Terms located at <https://www.ithaka.org/product-and-payment-terms>, each incorporated by reference into this Agreement. Licensee acknowledges Portico may suspend or terminate its access if it, or its Designated Staff or Authorized Users, violate these terms. This Agreement supersedes any and all prior agreements between the parties regarding the subject matter of this Agreement. Each party represents that it is authorized to execute and accept the terms of this document via electronic signature and that such signature shall be binding. Licensee may contact Portico at [participation@portico.org](mailto:participation@portico.org).

This Agreement shall continue in effect for three (3) years from the first days of the calendar year that follows the date of this Agreement, and thereafter will renew for successive one (1) year terms unless earlier terminated by either party by written notice not less than thirty (30) days prior to the end of the then-current term.

LICENSEE

BY: \_\_\_\_\_

NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_

DATE: \_\_\_\_\_

PORTICO

BY: \_\_\_\_\_

NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_

DATE: \_\_\_\_\_

**SCHEDULE A**  
**Designated Staff and Technical Information**

If this license is to cover multiple campuses or system branches, please list them below (attach additional sheets if necessary):

Note: Information regarding multiple campuses or system branches will be used to calculate the Annual Archive Support Payment.

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**Designated Staff**

Licensee may designate up to four staff members per campus or system branch that will be provided password protected full access to the Portico Archive for verification and testing purposes only. Please list the initial Designated Staff and their email addresses below (attach additional sheets if necessary):

Name	Email Address
1) _____	_____
2) _____	_____
3) _____	_____
4) _____	_____

**Technical Information:**

When campus-wide access to archived content is necessary and permitted by publisher agreements, Portico will contact the Licensee Technical Contact listed on the cover page of this agreement for IP addresses or domain names used by its campus(es) and other pertinent information. Portico reserves the right to delay access until the necessary information is provided.