



United States District Court  
 Southern District of West Virginia  
 MDL Video Conference Registration Form



**Video Conference Location Information**

Law Firm: \_\_\_\_\_

Building Name (if applicable): \_\_\_\_\_

Rm Number: \_\_\_\_\_

Floor Number: \_\_\_\_\_

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

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

City, State, Zip: \_\_\_\_\_

Notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Contact Information**

Technical Contact Name: \_\_\_\_\_

Technical Contact Email: \_\_\_\_\_

Technical Contact Phone: \_\_\_\_\_

Conference Room Telephone: \_\_\_\_\_

**Equipment Information**

Equipment Make: \_\_\_\_\_

Equipment Model: \_\_\_\_\_

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

Speed of Connection(Video Bit Rate): \_\_\_\_\_

Protocol: \_\_\_\_\_

**Testing Information**

Date Tested: \_\_\_\_\_

Length of Test: \_\_\_\_\_

Test Completed: \_\_\_\_\_