



GRI Report Services Sign-up Form

Fill out this form and submit it to reportservices@globalreporting.org to apply for a service. Note that we might ask you to provide additional information depending on the service you have chosen. You can also skip this form and apply directly via our [online sign up form](#)

REPORTING ORGANIZATION	
Name of the reporting organization	<u>Type of organization</u> <input type="checkbox"/> Corporate <input type="checkbox"/> Not-for-profit/SME
Country	GRI Community membership
	Reporting organization <input type="checkbox"/> Yes <input type="checkbox"/> No
Annual gross revenue	<input type="checkbox"/> € <1m <input type="checkbox"/> € <10m <input type="checkbox"/> € <100m <input type="checkbox"/> € 100m-1bn <input type="checkbox"/> € 1bn- 50 bn <input type="checkbox"/> € >50 bn
SUPPORT OPTIONS <i>For further details on services' scope, please review our methodology. Please also check GRI's Pricing Policy for fees for the service(s) of your choice.</i>	
Content Index Services	Add-ons
<input type="checkbox"/> Content Index Essentials Service <input type="checkbox"/> Content Index Advanced Service (<i>compulsory for reporters subject to using a GRI Sector Standard</i>)	<input type="checkbox"/> With Reference option (free of charge) <input type="checkbox"/> SDG Mapping add-on
Fast track timeline <input type="checkbox"/> Yes <input type="checkbox"/> No	
I hereby declare that the reporting organization develops substantial activities in sector(s) covered by an available GRI Sector Standard <input type="checkbox"/> Yes <input type="checkbox"/> No	
Sector Standard(s) used	
REPORT INFORMATION	
Title of your report	Estimated publishing date
Language of your report	Main Contact Person during the service <i>Name, job title, organization, email, and phone number</i>
If your report will be translated, please indicate the language(s) (if applicable)	
Reporting period (From/To) <input type="checkbox"/> From:	
<input type="checkbox"/> To:	
INVOICING DETAILS	
Name of paying organization	VAT number/fiscal number
Contact person <i>Name, job title, organization, department, email and phone number</i>	
Address:	
City	Postal code
State (if applicable)	
Purchase order number/invoice identification code <i>if required by the organization to appear on the invoice</i>	State if your organization requires the following document: <input type="checkbox"/> Certificate of Residence
Comments <i>Indicate if there are any additional conditions/documents that are required for a timely payment of the invoice or if your organization requires GRI to register the invoice in any supplier/vendor registration system.</i>	

Please tick the boxes to confirm:

By selecting a service, I agree to GRI's [Terms and Conditions](#), [Pricing Policy](#) and [Methodology](#) for the service I selected and confirm that I have provided GRI with the report and required information. I understand the timelines as outlined in GRI's Terms and Conditions.

By applying for a service, I declare that the details provided in this form are true and correct to the best of my knowledge.

I understand that GRI services do not verify, certify, check, or pass judgment on the report, the quality of the disclosures within a report nor the process of preparing the disclosures. GRI's services are not an external assurance engagement.

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