



Tole Friends' Memory Box Program Tutorial for Hospitals

Your hospital is part of the Memorybox Program, which was recently transferred to Tole Friends' Association. From now on we will coordinate requests for Memory Boxes and shipment of these to you. In order to serve you better and more efficiently, we have implemented an online system.

We understand that at first sight changing from simple email notifications to an online system can be frustrating or confusing, but you will soon discover this system is faster, easier and gives you less work.

1. Your first step is to register with our system, to do this please go to <http://memoryboxes.org/data/register.php> and fill in the blanks.

Registered Hospitals & Painters

[Registration Page](#)

[Back to Login Page](#)

username *	<input type="text"/>
password *	<input type="password"/>
Confirm password	<input type="password"/>
Email *	<input type="text"/>



Please enter the validation code shown *

Choose your username and password; type in your email address and the validation code from the image into the validation field. Please choose something you can remember easily because you will need it when you want to notify us about your need for boxes.

2. Once you have clicked on register, you will be taken to the login page and it will show in red at the top that you need to wait for an email. Once you receive the email click on the link in the email to activate your registration. Only after you have activated your membership (a security measure to make sure no one else can sign up for you), will you be able to log in.

The activation email you will receive is as follows:

Dear Sir/Madam,
Thank you for registering with us. Your registration details with us are as follows:
username: xxx
password: yyy
Email: youremail@isp.com
Please click the following link to activate your account:
<http://memoryboxes.org/data/register.php?action=confirm&email=youremail@isp.com&code=L9GaDxyivspRJM1uWst3OuybLQx3GjklgUEWi-RsO-4>.
Please feel free to contact us in case of further queries.
Best Regards,
Tole Friends' Memory Box Program
Administration

3. Once you have clicked on the link, your account will show as activated.

Registered Hospitals & Painters

Login Page

Your account is activated

User Name

Password

- Auto login until I logout explicitly
- Save my user name
- Always ask for my user name and password

Login

[Forgot Password](#)

[Register](#)

4. Due to an extra built-in security feature, it will be necessary for one of our administrators to set up your first record. This security measure will help to avoid those people who only want to cause problems for us with false requests.

In order to allow our administrator to set up your basic record, please send an email to co-chair@memoryboxes.org and paste the following text into the email and complete the information:

Name of Hospital: _____
Department receiving boxes: _____
Full Name & Title of contact person: _____
Street Address of Hospital (if necessary using both address lines): _____ _____
Town or City: _____
State: _____
Zip: _____
Country: _____
Phone: _____
Average monthly need of boxes: _____

Once our administrator has set up your basic record, you will receive an email and then may log in to request boxes.

5. Once you want to place a box request, please go to the [login page](#)

Registered Hospitals & Painters

Login Page

User Name

Password

- Auto login until I logout explicitly
- Save my user name
- Always ask for my user name and password

[Forgot Password](#) [Register](#)

Type in your username and password and lick on the login tab.

6. After you log in, you will see the general view:

Click on "Registered Hospitals" and you will see the record, which was preset by one of our administrators, in "table view"

Registered Hospitals & Painters

TABLE: registered hospitals [Printer Friendly](#) [Export to Excel](#) [Export to Word](#) [Export to CSV](#)

[Search \(*\)](#) [Show all](#) [Advanced Search](#)

Exact phrase All words Any word

Page of 1 Records Per Page

Records 1 to 1 of 1

Please contact the administrator, there are no records that match this login

			Date Last Modified	Contact Email (*)	Hospital Name (*)	Dept Receiving Boxes (*)	Hospital Name Contact (*)	Average Box Quantity/Month (*)	No. Of Boxes Requested	Req. Stat
View	Edit	Copy	2009/01/24	naties@cantv.net	Hospital ABC	Blue Ladies	Anne	5	5	New Req

[Add](#)

Please click on "Edit"

7. Your FIRST record, which was set up by one of our administrators, will show as follows:

Registered Hospitals & Painters

Edit TABLE: registered hospitals

[Go Back](#)

Hosp ID	432 1
Contact Email *	naties@cantv.net 2
Hospital Name *	<input type="text" value="Hospital ABC"/> 3
Dept Receiving Boxes	<input type="text" value="Blue Ladies"/> 4
Hospital Name Contact *	<input type="text" value="Anne Strebe"/> 5
Title (Mr, Miss, Mrs) *	<input type="text" value="Mrs."/> 6
Street Address *	<input type="text" value="mystreet"/> 7
Address 2	<input type="text" value="8"/> 8
City *	<input type="text" value="Lansing"/> 9
State (for non US choose outside USA) *	<input type="text" value="Michigan"/> 10
State Non US	<input type="text" value="11"/> 11
Zip *	<input type="text" value="3333333"/> 12
Country *	<input type="text" value="USA"/> 13
Phone (include area code) *	<input type="text" value="333"/> 14
Average Box Quantity/Month	<input type="text" value="5"/> 15
No. Of Boxes Requested	<input type="text" value="Please Select"/> 16
Request Status *	<input type="text" value="Request Pending"/> 17
Comments	<input type="text" value="18"/> 18

Legend:

7.1.Registration Record – **1**

Is assigned automatically by the system – cannot be changed.

7.2.Contact email – **2**

Was given by you during registration, the email address can only be changed by an administrator, if the email address for your hospital / contact person changes, [please send an email](#) and we will change it for you.

7.3.Through **7.10** – **3 - 10**

Was given to us in the email to our administrator (see 4 in this tutorial).

7.11. This field only needs to be filled if you are not established in the USA

7.12. Through **7.15** – **12 -15**

Was given to us in the email to our administrator (see 4 in this tutorial).

7.16. Number of boxes requested: – **16**

Please select from the dropdown menu.

7.17. Request Status: – **17**

Please change to "New Request"

7.18. Comments: – **18**

Please include any comments related to your request, for example, if you need gender specific boxes, ethnic designs, etc.

We will do our best to send you the required type or style of boxes, though we cannot guarantee these will be available at the time of your request.

8. On your FRIST record, which was created by us (see 4), you simply complete the information about the boxes that you have ready to ship and click on Edit.
9. For your next notification of boxes to ship you click "Copy" of your existing record, this will give you a pre-populated form and you only change the information for boxes and then click on the ADD tab at the bottom and the new form will be added to your records.
10. You will always be able to see ALL your records when you log in and also can download these to Excel, Word or as csv file see menu at the top of your table listing.

Please do not hesitate to contact us at admin@memoryboxes.com if you need further help.

Kindest regards,
Administration
Tole Friends' Memory Boxes Program

Karen Chase, Anne Strebe