

# TNSmartShop Registration

Registration form for new users in the TNSmartShop Marketplace.  
Please allow 24 hours for processing upon form submission.



\* Required

First Name \*  Last Name \*

What is your entity name? \*

Entity Type \*  Higher Education - LHE  K-12 Charter - LKC  Health Care - LHC  
 Law Enforcement - LLE  City or Town - LCT  Other:  
 K-12 Public - LKP  County - LCN

Are you a member of MMCAP? \*  Yes  No

*Minnesota Multi-State Contract Alliance for Pharmacy*

User ID \*  *Must be your email address*

Address 1 \*

Address 2

City \*  Postal Code \*

Phone Number \*

**General Procurement Information:**

**615-741-1035**