



INFINITY  
PARTNER



COMFORTCLUB

## Registration Form

Company Name: \_\_\_\_\_

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

Postcode: \_\_\_\_\_ Tel No: \_\_\_\_\_

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

FGas Registration No: \_\_\_\_\_

Companies house or VAT Registration number: \_\_\_\_\_

Chosen Distributor(s):



\*\*\*\*Please check\*\*\*\*

Customers are required to have either attended training in the last 12 months or be booked for training in advance of applying. Please ensure either your certificates of training or a request form are attached to this application

**Kindly return the completed form to our administrator**

Signed: \_\_\_\_\_

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

Print Name: \_\_\_\_\_

Position: \_\_\_\_\_

By signing the above, I confirm I have the authority to sign on behalf of my company and wish to join both the Fujitsu Comfort Club rewards scheme and Infinity Partner approved contractor scheme

We would like to send you further information regarding promotions on the schemes and updates regarding our product. Kindly confirm if you are happy to receive communications from us via email, phone and post regarding the Fujitsu Comfort Club, Approved Contractor Scheme as well as any Fujitsu Marketing Communications

Consent can be withdrawn at any time by emailing our administrator on [infinitypartner@fgac.fujitsu-general.com](mailto:infinitypartner@fgac.fujitsu-general.com)

I provide my consent

I do not provide my consent