



COMFORTCLUB

REGISTRATION FORM

Company Name: _____

Director(s): _____

Contact for the Comfort Club: _____

Registered Address: _____

Postcode: _____

Tel No: _____ Email: _____

TF Solutions Account No: _____

MCS Registration No (if applicable): _____

I currently purchase:

<input type="checkbox"/> Split Systems	<input type="checkbox"/> Air to Water
<input type="checkbox"/> VRF	<input type="checkbox"/> Other

Please return the completed form, along with a copy of your FGas certificate, to Lesley Giles at TF Solutions on lesleygiles@tfsolutions.co.uk or **Tool & Fastener Solutions Ltd, Spectrum Way, Cheadle Heath, Stockport, SK3 0SA.**

Signed: _____ Date: _____

By joining the Fujitsu Comfort Club i consent to receiving communications by email, phone and post regarding the Fujitsu Comfort Club, my Comfort Club Account and Fujitsu Promotions.

Print Name: _____ Position: _____

COMFORT CLUB OFFICE USE ONLY:

Approved by Fujitsu: _____ Date: _____

Comfort Club Membership: _____