

Save as you Learn Employee Registration...

Please complete the registration form below or register online at www.GemelliEmployeeBenefits.co.uk
Any questions please call us on 01280 851113...we're here to help.

Your Details

Name:	Mr / Mrs / Miss / Ms / Other		
Address:			
Postcode:		DOB:	
Phone:		Mobile:	
Work email:		Personal email:	

Employment Details

Employer Name:			
Work Location:		Normal Pay Day:	
Division/Cost Centre:		N.I No:	
Payroll/Employee No:		Hours Worked/Week:	
Gross Annual Salary:		Do you Receive Tax Credits?	Yes / No

Course Details

Training Provider:			
Course Name:			
Course Start Date:			
Length of Course:			
Current Job Title:			
Job the course is related to:			
Cost of Course:	£		
Period of Salary Exchange:months		
Pay Date Salary Exchange to Start:			

Continued on next page...

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Your Agreement

I confirm that the information I have given is accurate and that I have read and agree to the [Terms and Conditions](#) supplied. Gemelli may contact me using the details I have provided.

Data Protection

The information that you provide on this form will be used in a confidential manner to help us process your request to use one of the services we provide to your employer. We abide by the Data Protection Act and General Data Protection Regulations. We are conscious of only taking the personal data from you that we require and will keep it safe and secure. We may need to take limited details about you to process this application. You can find details of how we process your personal data in our [Privacy Policy](#) on our website.

I confirm that I understand and agree to the Data Protection Statement above and the terms of Gemelli's Privacy Policy.

Signed:	
Print Name:	
Date:	