Contract for services: Please read the enclosed Contract for Services Complete and sign both copies and return one copy with your registration form.

Eligibility to work in the UK (ETW): We require documents to confirm that you are eligible to work in the UK. Include one of the following with your registration:

. Your original Passport or a copy countersigned by a professional or manager.

. A full birth certificate and a recent HMRC document.

For non-EU nationals please visit to our website and refer to ETW guide.

Data Protection: All Data we hold about you and how we process and use it complies with the Data protection act.

Application Form

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| Applicant Information |
| Name:  |
| Date of birth: | Male / Female | Job Title: |
| Current address: |
| City: | County: | Post Code: |
| Date of Birth: | Job Title: | Nationality: |
| Professional qualification held: |
| Mob. Phone: | Other Phone: |  |
| National insurance no. | E-mail address: |
| Payment Details |
| Name of bank / building society: |
| Branch location: |
| Account no. | Sort code: |  |
| Name of account holder: |
| Emergency Contact |
| Name of a person to contact in an emergency: |
| Address: |
| City: | County: | Post Code: | Phone: |
| Relationship: |
| About the Assignment |
| Is the Assignment:

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|  |

 | UK Based: | Abroad: | Offshore: |
| How long will the Assignment last: |
| Assignment classification: | Trade: | Technical: | Rail: |
| Security Information |
| My chosen password is (seven digits): |
| Mothers maiden name: |  |
| Last school: | Town of birth: |
| How did you hear about us |
| Agency: | Colleague: | Existing client: | Online: | Advertising: |

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| “ I declare that all the information provided is correct and I understand that it is my responsibility to inform ‘YOUR PAY Ltd’ of any changes to my job title, personal, employment status, bank details as soon as possible. I also understand if I have provided details that relate to an account not held in my name, e.g. Spouse, and that relationship breaks down then YOUR PAY ltd cannot be held responsible for payments made to the nominated account. I also agree to the terms and conditions set out in the contract for services”  |
| Signature of applicant: | Date: |