**REGISTRATION FORM**

**ABOUT YOUR ORGANISATION**

|  |  |
| --- | --- |
| Organisation Name   * As you would like to appear on your certificates |  |
| Number of Applicants requiring screening   * Estimate over 12 months |  |
| Which checks are of interest to your organization:   * DBS |  |
| Organisation Address |  |
| Contact Number |  |
| Nature of Business |  |
| Job roles of the people you would like to check |  |
| Method of payment – Direct Debit or Credit/Debit Card |  |
| If selected DD – Please supply your Company Registration Number |  |
| Email address for invoices |  |

**Please confirm that you are happy to receive information relating to the latest uCheck products and additional services via email:**

 **Yes**

 **No**

You may opt-out at any time using the unsubscribe link in our emails. Please email [governance@ucheck.co.uk](mailto:governance@ucheck.co.uk) to see a copy of our Privacy Policy.

**PRIMARY CONTACT** (will receive all email notifications and will authorize and approve applications)

Title:

Forename:

Surname:

Email Address:

**ADDITIONAL SERVICE USER** (if applicable) Additional Users email must be different from the primary contact

Title:

Forename:

Surname:

Email Address:

Upon receipt of your reply we will be pleased to register you on our Vetting and Screening Platform, we will supply you with the necessary details of how to access the online Platform. If you have any queries, please contact us on **0300 1400022.**

**Please note that your information will be stored on our database.**