

**A
SIMPLE
WORK
PLACE
EYE
CARE
SOLUTION**



100%

OFF ALL PRODUCTS & SERVICES



NO FEES



NO HIDDEN COSTS

SIMPLY FILL IN THE FORM

And register your company

Company Name

Address

Contact Person

Phone number

Mobile

Fax

Email

TERMS AND CONDITIONS

- 1) The **FREE** membership must be renewed each year.
 - 2) Discounts are for staff and immediate family members only.
 - 3) Discounts do not apply to products and services already on special
- IMPORTANT:** The contact person and/or company above is responsible for informing employees of the discounts they are entitled too. If employees fail to inform Focal Point of their employer prior to completing the final payment process. No discounts or refunds will apply.

I hereby agree to the terms and conditions
Tick here

Signed _____ Date _____