Get with the programme, get with the rewards!

Within this document you will find a Registration, Employee Pledge and Employer Consent form. The Employer Consent form must be completed and signed by your employer. Please ensure ALL three forms are completed and hand them, along with a certified copy of your ID, to your Key Account / Hub Manager. Alternatively fax ALL three completed forms to 021 700 9713 or mail them to mobile@samsungsmartlife.co.za / consumerelectronics@samsungsmartlife.co.za.

Once your registration has been verified, we will send your Smart Life login details via email / SMS.
Registration Form – Samsung Smart Life Programme

Please make sure you complete all the fields in this form.

Personal Details:

Name:__________________________Surname:__________________________
ID Number:__________________________
Division: Mobile ☐ Audio Visual ☐ Digital Appliances ☐ Air-conditioning ☐

Contact Details:

Cell Number:__________________________Landline Number:__________________________

Email Address:__________________________
*Please use your personal email and cell numbers for security purposes.

Store Details:

Category:Floor Sales Person ☐ Sales Manager ☐ Store Owner ☐

Store Name:__________________________
Store Address:__________________________
Store Manager:__________________________
Province:__________________________

Samsung Key Account Manager or HUB Manager Name:__________________________

Disclaimer:
In signing this registration form:

1. You consent to become a participant in the Samsung Smart Life programme.
   ☐ Tick box to agree.

2. You consent to receive programme-related information from the Samsung Smart Life Programme Organisers.
   ☐ Tick box to agree.

Date:__________________________Signature:__________________________

Note: Once the Key Account/Hub Manager has verified your registration, you can begin logging your sales. Upon verification you will receive a confirmation email with your log in details. Please immediately log in at www.samsungsmartlife.co.za and familiarize yourself with the Smart Life Terms and Conditions. Please note that no payouts will occur until such time as the T & Cs have been accepted. Failure to accept T & Cs will result in a void registration. It will take 30 days for your card to be delivered to you following the completion of your registration.
Employee Pledge – Samsung Smart Life Programme

I, the undersigned

Name of Employee: 

ID Number of Employee: 

understand and consent that Samsung Electronics South Africa (Proprietary) Limited (“Samsung”) may use information gathered by my participation in the Samsung Smart Life Programme (“Programme”) for the following reasons:

1. Internal record keeping;
2. Fraud detection and risk management;
3. Improving internal operations and efficiencies;
4. Improving products and services.

Based on this understanding, I do hereby confirm that I duly consent to my employer requesting information from Samsung relating to my participation in the Programme.

Name of Employer: 

Owner of Store: 

I further consent to the exchange/transfer of information between my employer/store owner/dealer principal or any Parties where required by law and Samsung for purposes of audit, compliance and/or any other purpose as the circumstances require, in relation to my participation in the Programme.

Information may be provided to any other third parties, provided that I provide explicit consent.

Signed at ____________________________ on this the ____________ (day) of ____________ (Month) 20____ (year)

(Signature of Participant) 

(Store Name)

Employee Pledge Form
Employer Consent Form – Samsung Smart Life Programme

To be completed and signed by employer.

I, ____________________________________________ (FULL NAME), acting in my capacity as the employer of ____________________________________________ (“Smart Life applicant”), do hereby confirm the following:

- that the details provided by the Smart Life applicant are correct
- that I consent to the Smart Life applicant’s participation in the Samsung Smart Life programme
- that the Smart Life Participant Pledge has been signed by the Smart Life applicant and copy of same has been provided to me.

Signed at ____________________________ on this the _______ (day) of ___________ (Month) 20__ (year)

_________________________________________ (Signature of Employer)  ________________________________ (Store Name)