



# Table Tennis NSW Inc

## 2020 Registration Form & Tax Invoice

*(This form is to be used for New Registrations and Updating Current Registration Details)*

### **SECTION A: PLAYERS DETAILS**

Items shown in **BOLD** are mandatory items for registration. Items italicised are highly recommended

**Family Name:** \_\_\_\_\_ **Given Names:** \_\_\_\_\_

*Preferred Name:* \_\_\_\_\_ *Ratings Central ID:* \_\_\_\_\_

**Gender:** Male / Female **Date of Birth:** \_\_\_\_\_

TTNSW Number: \_\_\_\_\_ *Affiliated Club/Association:* \_\_\_\_\_

Postal Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ *Postcode:* \_\_\_\_\_

*Phone (H)* \_\_\_\_\_ (W) \_\_\_\_\_ (Mob) \_\_\_\_\_

*Email:* \_\_\_\_\_

*If an email address is provided correspondence will be forwarded by e-mail unless otherwise indicated.*

### **SECTION B: DISABILITY STATEMENT:** (if applicable)

Do you have a disability? Yes / No

Class: \_\_\_\_\_ (if known)

Description: \_\_\_\_\_

### **SECTION C: REGISTRATION LEVEL**

*(circle correct category or cross out incorrect categories)*

- |   |          |          |
|---|----------|----------|
| 1 | NATIONAL | \$120.00 |
| 2 | STATE    | \$90.00  |
| 3 | DISTRICT | \$70.00  |
| 3 | SOCIAL   | \$17.00  |

**AMOUNT PAID: \$** \_\_\_\_\_

I agree to abide by the Constitution and By-Laws of Table Tennis NSW Inc and the rules governing the Code of Conduct for the Association. Please check website [www.tt NSW.org.au](http://www.tt NSW.org.au)

**Signature of applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Persons registered at Levels 1,2 or 3 will be placed on the Mailing List to receive all communication from the TTNSW office, which will include Tournament Entry Forms. If you do not wish to receive mailings, please indicate below by crossing out the appropriate option

Postal: PO Box 6952 Silverwater NSW 2128  
Office: Quad 1, Level 2, 8 Parkview Drive,  
Sydney Olympic Park, NSW 2127

Phone: 02 8736 1266  
Fax: 02 8736 1267  
E-mail: [mail@tt NSW.org.au](mailto:mail@tt NSW.org.au)  
Website: [www.tt NSW.org.au](http://www.tt NSW.org.au)  
ABN: 73 959 528 443



# Table Tennis NSW Inc

## REGISTRATION LEVEL DETAILS

Level	Fee	Insurance	Courses	International / National Tournaments	State Tournaments	Team Pennants	Local Tournaments	Coaching / Casual Play
<b>National</b>	<b>\$120.00</b>	✓	✓	✓	✓ Any <sup>2</sup>	✓ Any <sub>2</sub>	✓ Any <sup>2</sup>	✓
	Any person who resides within NSW and plays or officiates at National or International Level events.							
<b>State</b>	<b>\$90.00</b>	✓	✓		✓ Any <sup>2</sup>	✓ Any <sub>2</sub>	✓ Any <sup>2</sup>	✓
	Any person who resides within NSW and competes in State Tournaments or Tournaments organised by affiliates other than their registered affiliate or Team Pennants organised by affiliates in addition to their registered affiliate.							
<b>District</b>	<b>\$70.00</b>	✓	✓			✓ Own	✓ Own	✓
	Any person who resides within NSW and competes in a Team Pennant organised by their local affiliate, the Country Championships or the City vs Country Challenge.							
<b>Social</b>	<b>\$17.00</b>							
<b>Metropolitan Sydney</b>		✓						✓
<b>Country NSW</b>		✓				✓ <sup>1</sup>	✓ <sup>1</sup>	✓
	1. Any person who resides within NSW and only plays in competitions organised by their registered affiliate or against other country affiliates within a 300Km radius or under such other conditions as determined by the TTNSW Council from time to time.							

2. Players must meet criteria for entry into the events as specified by the host affiliate.

### Please make your cheque/money order payable to TTNSW or direct deposit into the account below:

BANK COMMONWEALTH BANK, ULLADULLA NSW  
 BSB 062 646  
 ACCOUNT NUMBER 1003 4653  
 ACCOUNT NAME TABLE TENNIS NSW  
 Reference "TTNSW Number" and "Rego".

Postal: PO Box 6952 Silverwater NSW 2128  
 Office: Quad 1, Level 2, 8 Parkview Drive,  
 Sydney Olympic Park, NSW 2127

Phone: 02 8736 1266  
 Fax: 02 8736 1267  
 E-mail: [mail@ttnsw.org.au](mailto:mail@ttnsw.org.au)  
 Website: [www.ttnsw.org.au](http://www.ttnsw.org.au)  
 ABN: 73 959 528 443