

Canterbury and District Table Tennis Association

Team registration form 2018/2019 Season

Please note that our Data Policy is included and the Data Consent Form **HAS TO BE completed** and **signed** in order that you play in our league. Failure to do this will exempt you from playing

Name of Club Team

Playing Venue Tel.
 Address

Club Secretary Tel. H
 Address Tel. W
 Mob.
 E Mail

Team Secretary Tel. H
 Address Tel. W
 Mob
 E Mail

Please tick box if you **do not** want number in handbook

Please note at least one number must be authorised

Match Night(M - F) To Play on same night as Team
 Alternate with Team Match start time Please note this should be such
 except in exceptional circumstances at least 2 home team members will be at the playing venue 15 minutes
 time stated for the commencement of the match, the committee reserves the right to discuss a revised start time should
 they consider it is unreasonable.

The Team has a preference to play in the Division I understand that this is subject to it being
 clearly understood that the Management committee will decide on the placing of teams within the divisions, and this will
 be governed, to a large extent, by the total number of entries received (See rule 10(b))

Team Members (please complete in full)

NB. Entries marked with an * have been requested by the TTE but are voluntary

Tick this box if your team **does not** want to enter cup competitions