



# Table Tennis New Zealand - Registration Form

<input checked="" type="checkbox"/>	New	<input type="checkbox"/>	<input type="checkbox"/>	Renew	<input type="checkbox"/>	Reg No:	<input type="text"/>
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(Mr, Mrs, Ms, Miss) \_\_\_\_\_

**Please Print Clearly**

First Names \_\_\_\_\_

Surname \_\_\_\_\_

Address (no & street) \_\_\_\_\_

(suburb) \_\_\_\_\_

(city/town) \_\_\_\_\_ (post code) \_\_\_\_\_

E-Mail \_\_\_\_\_ @ \_\_\_\_\_

(By inclusion of email details you agree to receive any newsletters from TTNZ)

Phone (Priv) ( ) \_\_\_\_\_ (Bus) ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_

Date of Birth day  month  year

Club \_\_\_\_\_ Association \_\_\_\_\_

Association Secretary \_\_\_\_\_

I am an affiliated/registered member of the above association. Please register me with Table Tennis New Zealand for the period ending 31 December this year.

Signed \_\_\_\_\_ Date: \_\_\_\_\_

All information provided will remain confidential in accordance with the **Privacy Act 1993**. You may access and request correction of any personal information about you held by Table Tennis New Zealand Inc. The information will be used for statistical purposes and for communication with you by Table Tennis New Zealand and your club or association.

Pass form to your  
Association Secretary.

**TABLE TENNIS New Zealand Inc.**  
<http://www.tabletennis.org.nz>