

Table Tennis ACT

2018 Membership Application

Postal Address: PO Box 4983 Kingston ACT 2604 - Tel. 6295 9607

www.tabletennisact.org.au

email: tabletennisact@gmail.com

Centre Manager: 0409 607 588

Table Tennis ACT (TTACT) is an association with an active Pennant Competition, Seniors Program, Athletes with Disability (AWD) Program and a free Juniors Training Program for financial members. TTACT welcomes players of all standards and provide members with free access to the centre when tables are not booked for other purposes. TTACT has a number of qualified coaches who provide coaching at a cost to members.

Membership Fees

Membership fees are set for a range of categories. Membership fees include a levy to Table Tennis Australia and a payment for insurance. Membership fees for new members, who join after 1 July, are reduced to \$88. For members joining/renewing after 30 September and before 01 December of a calendar year, the minimum \$48 membership fee applies in order to cover costs for the remainder of the year. The full membership fee applies for members who join/renew in December as they are members for the following calendar year.

The categories and associated fees for 2018 membership are:

- **Adult Full Active Members:** Members who intend to participate in organised competitions in Pennant or any TTA affiliated state/national event, either as a full time player or reserve. A fee of \$163 covers Registration, Affiliation, and Insurance payments to TTA. A Seniors Card discount of \$20 applies, and a concession fee of \$88 is offered for Full Time Students and Government pensioner/Health Card holders.
- **Junior Full active members:** Members under 18 who intend to participate in organised competitions in Pennant or any TTA affiliated state/national event, either as a full time player or reserve. A fee of \$88 covers Registration, Affiliation, and Insurance payments to TTA.
 - **Athlete with a Disability (AWD):** Athletes that meet this criteria that play in organised competitions in Pennant or any TTA affiliated state/national event, either as a full time player or reserve. A fee of \$88 covers Registration, Affiliation, and Insurance payments to TTA.
- **Social Members:** Members **who do not participate in organised** competitions and play socially. A fee of \$88 applies, which covers Insurance from TTA, but does not cover registration with TTA.
- **Associate Members:** Members whose normal place of residence is more than 120 Kilometres from the Table Tennis centre and **who do not participate in organised** competitions and play socially. A fee of \$68 applies, which covers Insurance from TTA, but does not cover registration with TTA.
- **Schools Group/restricted:** Participants in supervised training at selected ACT venues -- \$15.
- **Family members:** Any parent of junior players may take a family member package. When a parent is a full active member and has paid the full fee of \$200, they may have their children (under 18) included as members for no additional charge. A separate membership form is available for family memberships.

Personal Details

Your personal details are entered on the TTACT database, securely stored, and only used for official TTACT purposes. Only your name, date of birth and postcode are provided to Table Tennis Australia (TTA). TTA issues your National ID number, which is required on all championship entry forms. Competition lists are on public display on the notice board in the table tennis centre and only show your name and phone number (as given under 'Personal details'). Competition lists are also displayed on the TTACT web site (names only). Emergency contact details are also securely stored and are only accessible by TTACT officials.

VOLUNTEERS NEEDED

TTACT depends heavily on the voluntary efforts of members. Skills or assets we particularly welcome are administrative, promotion/advertising, carpentry, electrical, manual labour, information technology, truck/trailer transport, First Aid and accounting.

Lodgement of Membership Form

- 1) Email to tabletennisact@gmail.com with payment details
- 2) Mail or present the completed form and full fee to: the Centre Manager, Table Tennis ACT, PO Box 4983, Kingston, ACT 2604; or to a Board Member. A receipt will be issued.

Table Tennis ACT

2018 Membership Application

(1 JANUARY 2018 TO 31 DECEMBER 2018)

ARE YOU A NEW MEMBER? Please tick: or ARE YOU RENEWING YOUR MEMBERSHIP? Please tick:

Surname:		Given Name(s):		Preferred Name:	
Street Address:			Suburb/Town:	Territory/State:	Post Code:
Date Of Birth:			Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female		
Contact Details Phone (M):		Phone (W):		Phone (H):	
Preferred Email:					
Emergency Contact Details*		Name:		Relationship to member:	
		Address:		Emergency Phone:	
Membership Category					Membership Fee (incl. GST)
Adult member who participates in organised competitions Tick One and write the relevant \$ amount in the membership fee column Full \$163 <input type="checkbox"/> Seniors Card \$143 <input type="checkbox"/> Full Time Student \$88 <input type="checkbox"/> Govt. Pension or Health Care Card \$88 <input type="checkbox"/>					
Junior (under 18 years) \$88					
Athlete with a Disability (AWD) \$88					
Social member who does not participate in any organised competitions \$88					
Associate (place of residence >120 km from Kingston) \$68					
Schools Group/AWD Restricted \$15					
Total					

Payment Options: please complete relevant details below:

1. Preferred Method Direct Deposit

Please pay your Fee of \$_____ to: Account Name: Table Tennis ACT, Bank BSB 032 713, Account No 234057 (Please record your name as the reference for the transfer).
Date funds transferred (Please record your name at the time of transfer) (If paying at a bank branch, please note date of payment and attach deposit receipt from bank)

2. Credit Card

Charge \$..... to my <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa Card
Card No: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Exp Date _____/_____/____ CVV _____ Name _____

3. Cheque (payable to Table Tennis ACT) (Please attach your cheque to this form)

I agree to abide by the Constitution of the Association, its by-laws and Board requirements including the promotion and conduct of the sport.

SIGNATURE: _____ DATE: _____