**Diss and District Table Tennis League Players Personal Registration Form**

Please complete all details and sign and date the form at the bottom.

**The Club that you play for:**

|  |
| --- |
|  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Your full name | Your full address inc Post Code | Your telephone number | E mail address | Date of Birth | Emergency contact name and telephone number if different from personal Tele No. | Your Table Tennis England membership number for 2018 -19 |
|  |  |  |  |  |  |  |

**Your Signature………………………………………………….**

**Date……………………………………………………………….**

By giving this information and signing this form you are agreeing to the privacy policy as laid out on our website. Please visit ([*https://www.tabletennis365.com/Diss/Admin/HomePage/PrivacyNotice*](https://www.tabletennis365.com/Diss/Admin/HomePage/PrivacyNotice)) for full details.