

**SALISBURY TABLE TENNIS ASSOCIATION**

# Player Membership Form for the playing season 2018/2019.

Please fill in the following information so that you can be registered as a playing member of STTA.

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| Player Name |  |
| Registering to play in which team |  |
| Home Address |  |
| Date of Birth |  |
| Telephone number |  |
| Email address |  |
| Table Tennis England membership number |  | Please tick if membership has been renewed. |  |
| Emergency Contact Information |  |
| STTA members fee | £11 / free for under 18 (delete as appropriate) |

**Please make sure you complete the Data Protection information on the reverse side of this form.**

**Please make sure that your TTE membership has been renewed before the start of the season.**

Please return this form to your team captain, together with STTA member fees, **as** **soon as possible** **or** send direct to:

**Gill Thompson, 18 Alder Drive, Alderholt, Dorset SP6 3EP**

# Data Protection (aka GDPR)

The information you provide in this form will be used solely for dealing with you as a member of the Salisbury Table Tennis Association (STTA).

The STTA has a Data Privacy Policy which can be found online at the “Table Tennis 365” website <https://www.tabletennis365.com/Salisbury>. Your data will be stored in accordance with this policy.

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| The STTA is likely to publish a membership handbook, yearbook or directory. This would include relevant member’s (e.g. club/team captains, committee members) name, email addresses, phone/ mobile number, and will be available in either electronic or paper versions. If you consent to your data being shared in this way, please tick here. | □ |

Please be aware that if you later decide to withdraw consent to your contact details being published it will not be possible to remove your contact details from printed material until such time as the next edition of the handbook is printed, which will be on a yearly basis.

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| The Club may arrange for photographs or videos to be taken of STTA activities and published on our website or social media channels to promote the STTA. If you consent to your image being used by the STTA in this way, please tick here. | □ |

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| PARENTAL/GUARDIAN CONSENT (if under 18) If you consent to the use of your child’s image being used for the purposes above please tick here. | □ |

If you later wish to withdraw consent, please contact a member of the STTA committee.

By agreeing to your images being used, you agree to assign any copyright or any other right of ownership of these images to the STTA.

Member’s Signature…………………………………………………………….Date……………………………

For members under the age of 18:

Parent/Guardian’s Signature…………………………………………………………….Date……………………………