**MEMBERSHIP FORM**

**2021-2022**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **TTE Member No.** |  | | **BTTC Member No.** | |  |
| **TTE Member Type** |  | | **BTTC Member Type** | |  |
| **MEMBER DETAILS** | | | | | |
| **Title:** |  | |  | | |
| **First Name:** |  | | **Surname:** |  | |
| **Date of Birth:** |  | | **Gender:** |  | |
| **Address** |  | | | | |
|  |  | | | | |
|  |  | | | | |
| **Postcode:** |  | | **Home Tel:** |  | |
| **Work Tel:** |  | | **Mobile Tel:** |  | |
| **Email address:** |  | | | | |
| **MEDICAL INFORMATION** | | | | | |
| **Please detail below any medical information that the club should be aware of, relevant to participating in club activities. This information will be treated as confidential** | | | | | |
| Medical Condition (e.g. epilepsy, diabetes, asthma, etc.) | |  | | | |
| Emergency contact name and No: | |  | | | |
| Your Doctor’s name and number: | |  | | | |

**PLEASE COMPLETE BOTH SIDES BEFORE SIGNING**

**DECLARATION**

I have read and agree to abide by the club rules and codes of conduct.

**Data Protection**

The information you provide in this form will be used solely for dealing with you as a member of a Brandon Table Tennis Club.

The Club, as a member of Table Tennis England, abides by their Data Privacy Policy which is available on request. Your data will be stored in accordance with this policy.

I also agree to the information given on this form being held on the club’s membership database.

**Please tick here if you consent to your information being held in this way**.

The Club may wish to publish a Membership list. This would include relevant member’s name, email addresses, phone/ mobile number, and will be available in either electronic or paper versions.

**If you consent to our 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 list is printed.

The Club may arrange for photographs or videos to be taken of members and published on our website or social media channels to promote the Club.

**If you consent to your image being used by the Club in this way, please tick here.**

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

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

* **I understand that my child in my care will be required to abide by the club rules and codes of conduct, and that in the event of an incident all reasonable steps will be taken to use the emergency contacts.**
* **I give/do not give\* permission for the administration of appropriate urgent medical treatment including an anaesthetic.**
* **I give/do not give\* permission for my child to appear in photographs taken during club activities and used in club publicity material, press releases and on the club or Table Tennis England website. (\*delete as appropriate)**

All data held by this club will be held in accordance with the published Table Tennis England Data Protection Policy. This strictly limits the passing on of Member’s details.

You may wish for your data never to be passed on. If so please tick this box:

**PLEASE COMPLETE BOTH SIDES BEFORE SIGNING**

##### Signed…………………………………………. Name…………………………………… Date………………