

Membership Type			
New	<input type="checkbox"/>	Renewal	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>

Personal Details	
MEMBERSHIP NUMBER (if known)	
SURNAME	
GIVEN NAMES	
DATE OF BIRTH	
ADDRESS	
	POSTCODE
HOME PHONE	
WORK PHONE	
MOBILE	
EMAIL	
EMERGENCY CONTACT NAME	
EMERGENCY CONTACT NUMBER	
MEMBER OF ANY OTHER TABLE TENNIS CLUB?	

Membership Level		
Club Tournament	\$ 110	<input type="checkbox"/>
Club Tournament Concession	\$ 100	<input type="checkbox"/>
Social*/ Secondary	\$ 60	<input type="checkbox"/> *does not apply to organised competitions

Declaration	
<input type="checkbox"/>	I understand, and agree to be bound by the Rules, By-laws, Policies and Code of Conduct of the Rockhampton Table Tennis Association and Table Tennis Queensland.
<input type="checkbox"/>	I give permission for images in which I appear, accompanied by my name, to be used by Rockhampton Table Tennis Association Inc. for publication and public relations activities.
Member's Name	
Member's Signature	
Parent/Guardian's Name	(If Under 18 Years)
Parent/Guardian's Signature	(If Under 18 Years)
Date	/ / 2024