

Dr Ng Eng Hen Cup – STTA Table Tennis Championships 2019

06 to 15 September 2019 @ Toa Payoh Central Community Club

Registration Form

Open to Singapore citizens only. A player can only participate in a maximum of 2+1 events which includes two age group events and one open event. For age group events, he/she is only permitted to play in his/her age group category and the next immediate higher age group. For example, a 12-year-old girl can participate in “Girls’ 12 and Under”, “Girls’ 15 & Under” and “Women Singles” categories but cannot register for “Girls’ 18 & Under” Category.

I would like to participate in the following event(s):

(Please tick accordingly)

(Deadline: **19 July 2019 (Friday) at 12.00 noon**)

- | | |
|--|---|
| <input type="checkbox"/> Men’s Singles (\$12) | <input type="checkbox"/> Women’s Singles (\$12) |
| <input type="checkbox"/> Boys’ 18 & Under (\$12) | <input type="checkbox"/> Girls’ 18 & Under (\$12) |
| <input type="checkbox"/> Boys’ 15 & Under (\$12) | <input type="checkbox"/> Girls’ 15 & Under (\$12) |
| <input type="checkbox"/> Boys’ 12 & Under (\$12) | <input type="checkbox"/> Girls’ 12 & Under (\$12) |
| <input type="checkbox"/> Boys’ 9 & Under (\$12) | <input type="checkbox"/> Girls’ 9 & Under (\$12) |

Total Registration Fee = \$ _____

(Name as in Birth Certificate / NRIC. Please use Dark Pen to fill the following data CLEARLY)

Name : _____ (Chinese)

*Player ID: _____ Date of Birth : _____ (dd/mm/yy)
(compulsory) (compulsory)

Contact No. : _____ (Mobile) _____ (Home)
(compulsory)

Address : _____ S()

Email : _____
(compulsory)

(Please write in the name of your school/club in FULL)

School / Club : _____

*Player ID can be found at <http://stta.tournamentsoftware.com/find/player>.

For players who have not participated in any STTA’s Tournaments, you may leave this column empty. A new Player ID shall be assigned by STTA.

Privacy Policy

The “Organisers” (namely *Toa Payoh Central Community Sports Club and Singapore Table Tennis Association*) take this opportunity to share with you the Privacy Policy which outlines how they manage your personal data including the purposes for which your personal data may have been or may be collected, used or disclosed.

Please note that the Privacy Policy forms a part of the terms and conditions governing your relationship with the “Organisers” and should be read in conjunction with those Terms and Conditions.

By participating in this “Competition” (*Dr Ng Eng Hen Cup – STTA Table Tennis Championships 2019*), you have agreed that the “Organisers” may be able to use your personal information to contact you regarding the “Competition” and to share upcoming events. You may, however subsequently inform the “Organisers” through any form of media (email, phone or in writing) should you decide not to receive any.

Information gathered will not share with other entities. Please contact the "Organisers" should you have any queries.

I read and fully understand and agree with the Privacy Policy.

I understand that the registration form will be discarded without prior notification given if it is incomplete or the handwriting is illegible or the information given is incorrect or payment is not settled before the closing date.

INDEMNITY:

In this declaration, I hereby agree that I will not hold Toa Payoh Central CSC, Singapore Table Tennis Association, their appointed staff or officials responsible in any way for any mishaps, injuries or loss of life or for loss of or damage to any property howsoever arising out of or in the course of or in connection with the above activities; and I shall indemnify Toa Payoh Central CSC, Singapore Table Tennis Association and their appointed staff and officials from and against any actions, proceedings, liabilities, claims, damages, cost and expenses which may be brought by or asserted against them by any person in connection with the same.

Signature of Applicant

Date

To be completed by parent / guardian of the applicant under 18-year-old

I, _____ (Name), declare that I am the parent / guardian of the applicant and certify that his / her particulars given are true and correct, and give my full consent for his / her participation. I hereby indemnify and agree to keep Toa Payoh Central CSC, Singapore Table Tennis Association and their appointed staff and officials from and against any actions, proceedings, liabilities, claims, damages, cost and expenses which may be brought by or asserted against them by any person in connection with the same.

Signature of Parent / Guardian

Date

Official Use Only

Receipt No.: _____ Collected by: _____ Date: _____