

**SINGAPORE TABLE TENNIS ASSOCIATION  
DELEGATE(S) NOMINATION FORM**

(Submission Deadline: **12.00 noon on 9 September 2024**)

To: The Honorary Secretary  
Singapore Table Tennis Association  
5 Stadium Drive #03-40 OCBC Arena  
Singapore 397631

Email: [agm@stta.org.sg](mailto:agm@stta.org.sg)

**STTA ANNUAL GENERAL MEETING (AGM) 2024**

**Monday, 16 September 2024 7.30 pm (Registration & Dinner Starts from 6.30 pm)**

**Declaration:**

Our establishment's UEN no. is \_\_\_\_\_ and it is (*please tick one*):

<input type="checkbox"/>	Registered as a Club with ROS	<input type="checkbox"/>	Institution of Higher Learning
<input type="checkbox"/>	Registered as an Association with ROS	<input type="checkbox"/>	Community Sports Club under People's Association
<input type="checkbox"/>	Registered with ACRA	<input type="checkbox"/>	Government Ministries / Statutory Board / its Affiliate

Please tick the following as your declaration that you have met STTA's Full Membership criteria.

We declare that we HAVE on-going table tennis training and development programmes with 20 or more participants and/or registered at least 20 or more participants for table tennis competitions, programmes and/or courses within the last 24 months and shall provide the relevant proof as and when requested by STTA.

We HAVE fully paid the annual subscription fee for 2024.

**Nomination:**

We would like to nominate the following delegate(s) to attend the AGM:

<b>* delegate (A)</b>	Name: (as in NRIC)		NRIC no.: (last 4 characters, e.g. 123H)	
	Email:		Mobile phone no.:	

<b># delegate (B)</b>	Name: (as in NRIC)		NRIC no.: (last 4 characters, e.g. 123H)	
	Email:		Mobile phone no.:	

**\* delegate (A) shall attend the AGM with VOTING right.**

**# delegate (B) shall attend the AGM with NO voting right.**

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We hereby acknowledge and confirm that the above declarations are true and accurate. In the event that the above declarations are not true and accurate or if we did not meet the criteria as STTA's Full Member, STTA has the discretion to treat this form as invalid &/or disqualify the nomination.

\_\_\_\_\_  
Signature of Chairman/Hon. Secretary

\_\_\_\_\_  
Name of Signatory

\_\_\_\_\_  
Name of Full Member (e.g. ABC Sports Club)

\_\_\_\_\_  
Email of Full Member

\_\_\_\_\_  
Tel No of Full Member

\_\_\_\_\_  
Date

\_\_\_\_\_  
Organization stamp

**Note:**

- i. Please use a rubber stamp of your club/organisation to authenticate the nomination of your delegates.
- ii. Please submit the completed form to STTA via email to [agm@stta.org.sg](mailto:agm@stta.org.sg) or by hand to its official address stated above no later than **12.00 noon, 9 September 2024**.
- iii. STTA shall acknowledge receipt via email or hardcopy depending on the mode of receipt of the submission. Please note that only duly acknowledged submission will be considered.
- iv. STTA shall be entitled to reject the form if it is incomplete, improperly completed or illegible
- v. By providing the above details, the member consents to the collection, use and disclosure of the personal data by STTA, its agents and/or its service providers, for the purpose of processing, administering and granting access to members to attend the AGM proceedings, and the preparation and compilation of the attendance lists, minutes and other documents relating to the AGM.

Acknowledgement of Receipt by STTA:  _____ (Name & Signature)	_____ (STTA stamp & Date)
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