



The aims of the BTTAD are to promote Table Tennis for all people with disabilities working closely with the national governing bodies of Table Tennis (ETTA, ITTA, STTA, TTAW), BTTF and all disability organisations.

**2014 APPLICATION FOR BTTAD MEMBERSHIP: 01/01/14 to 31/12/14**

**Full Membership** (£10.00) Any person who has a physical, sensory or learning disability.

Please tick

**Junior Membership** (£5.00) Any person under 18 on 1/1/2014 who has a physical, sensory or learning Disability.

**Associate Membership** (£7.00) Supporters of the objectives of the Association.

**Organisational Membership** (£20.00) Any organisation supportive of the objectives of the Association.

**Mr/Mrs/Miss/Ms SURNAME:** ..... **FIRST NAME/S:** .....

**ADDRESS:** .....

**POST CODE:** ..... **DATE OF BIRTH (Juniors):** .....

**Tel. Number (Home)** ..... **(Mobile)** .....

**E-Mail:** .....

**Disability/Clinical Diagnosis: (Optional but may help with Classification)** .....

**Class (if known):** ..... **Internationally Classified Y/N** ..... **or Profile:** .....

**Club:** .....

**Member of any National Table Tennis Association** ..... **If Yes, Membership No:** .....

**TO BE COMPLETED BY ASSOCIATE MEMBERS** Interest in BTTAD .....  
(Coach, Umpire, Official, Administrator, Supporter, etc.)

**TO BE COMPLETED BY ORGANISATIONAL MEMBERS**

Please insert the name and contact details of your nominated representative above.

Organisation .....

Name of Officer completing form ..... Position .....

**PLEASE COMPLETE FORM AND SEND WITH MEMBERSHIP FEE** (Cheques payable to "BTTAD") **TO Jill Pegram, 69 Raglan Gardens, Watford, WD19 4LJ**

Signature of Applicant..... Date.....

Please could you complete the Equality and Disability Feedback Sheet (Optional - but useful for the BTTAD's confidential data purposes).

ALL DONATIONS GRATEFULLY RECEIVED BY THE BTTAD ARE USED TO PROMOTE ACCESSIBLE TABLE TENNIS FOR ALL DISABLED PEOPLE