



Membership Form

2024

Personal Information:

Full Name:

Date of Birth:

Address:

City/Town:

Postal Code:

Phone Number:

Email Address:

Membership Type: General Membership - \$11

Membership Benefits:

- Voting rights at the Annual General Meeting (AGM)
- Eligibility to participate in selection for multi-sport games and national championships
- Recognition as a member in good standing with Table Tennis North
- Be considered for a Board of Director position with Table Tennis North

Membership Duration:

Membership is valid for the calendar year, from January 1st to December 31st

Emergency Contact Information:

Name:

Relationship:

Phone Number:

Consent and Agreement:

By signing below, I agree to abide by the rules and regulations of Table Tennis North and understand the benefits and responsibilities of my membership. I acknowledge that my membership is valid for the current calendar year and that I am entitled to the rights and privileges outlined above.

Signature:

Date:

Payment Information:

Cash

Cheque (Payable to Table Tennis North)

E-transfer (info@tabletennisnorth.ca)

