



APPLICATION TO RUN AN OPEN TOURNAMENT

To be submitted by one of the following as applicant and host:

- An officer of a PremierClub/ Associate Club/ League/ County on behalf of that organisation ¹
- A Registered Team/ Individual Member/Technical Official ^{2 3}

All individual memberships and organisational affiliations must be current and complete for an application to be considered

Important: Please read the attached Notes carefully before completing **all parts** of this form

1. Full Name of Tournament:
2. Star Grade:
3. Date(s) of Tournament:
4. Venue:
Address:
Post Code:
5. Cadet/ Junior / Senior / Veteran:
6. Events (Saturday)
Overall length of day:

	Event (inc age-group/ gender)	Proposed format	Projected minimum # of games for player	Projected capacity
1				
2				
3				
4				
5				
6				

¹ The designated officers are the named committee members of an affiliated club/ league/ county, such as the Chair, Administrator, Treasurer or Secretary. These are defined in the TT Membership system.

² Please note that a Registered Team/ Individual Member/Technical Official will be required to submit appropriate evidence of minimum standards and safeguards including Public Liability Insurance, Equal Opportunity and Safeguarding policies, safeguarding certification and Risk Assessments

³ This refers to directly affiliated members only and does not include 'reciprocal members'



7. Events (Sunday):

Overall length of day:

	Event (inc age-group/ gender)	Proposed format	Projected minimum # of games for player	Projected capacity
1				
2				
3				
4				
5				
6				

8. Person to receive entries:

Address:

Post Code:

9. Closing date:

10. Playing Conditions:

- a) Size of courts:
- b) Number of tables to be used:
- c) Make of tables to be used:
- d) Make, grade and colour of balls to be used:
- e) Type of floor:
- f) Whether lighting over each table or general only:
- g) Minimum height from floor of lighting over table:

11. Type of lighting and Lux:



12. Name of the Referee:

Qualification:

TTID number:

Email address:

13. Name of the Deputy Referee:

Qualification:

TTID number:

14. Tournament Organiser's name:

Qualification:

TTID number:

Address:

Post Code:

Tel No:

Email address:

Please note that the individuals named in 12, 13 and 14 must be current TTE members. The Tournament Organiser will be considered the Safeguarding Lead, unless otherwise indicated, and will require current Safeguarding certification.

(see next page)



Notes on completing Table Tennis England Form OT1

The numbers refer to the corresponding sections of the first page

- 1 This is the name by which the tournament is to be known; if the Star rating is not included in the title it must be prominently shown on the front cover of the Entry Form
- 4 If the venue is definitely not known at this stage, no firm arrangements will be made. Dates will remain provisional and may be allocated to another event
- 10 Actual measurements/numbers are required for items a), b), and g)
- 11 Actual measurements/numbers are required
- 12/13 If the name of the Referee or Deputy Referee (where required) is not stated, the date will at best be 'pencilled in' on the Calendar

Please Note:

If the venue is in the area of jurisdiction of a County Association other than that to which the promoting body is affiliated, you must inform that other County Association of the venue and dates of the tournament

It is the responsibility of the Tournament Organiser to submit the OT1 Form to the County Association to which the promoting body is affiliated **before** the application is sent to the appropriate Tournament Approval Panel member.

Important:

- If you wish to change the date of your tournament after your application has been considered by your County Association, Table Tennis England will need to obtain your County's views on the change – a process that will delay the granting of permission to run the tournament.
- Make sure that you have read and understood the Table Tennis England Tournament Regulations for the grade of tournament that you are intending to run. Please refer also to the 'Tournaments Explained' supporting document.
- If any information is omitted from the Application Form the Table Tennis England Tournament Approval Panel reserves the right to grant only provisional permission until all the necessary information has been supplied.

Please return this application to: Tournament Approval Panel committee member Gary Whyman

Email: G.P.Whyman@btinternet.com

(see next page)



Declaration

- I undertake that the Tournament will be organised and run in accordance with current Table tennis England regulations and the 'Tournaments Explained' supporting document published on the TTE website as of the date of application
- I acknowledge and agree to adhere to requirements including:
 - All relevant TTE technical regulations
 - All relevant TTE codes of conduct, policies and procedures inc safeguarding
 - Ensuring all participants are TTE members at the appropriate level before the tournament begins
 - Paying the Tournament Levy within 7 days or by the ranking deadline (whichever is sooner)
 - Submitting a record of yellow and red cards issued on OT3 form (Misconduct Report) within 7 days or by the ranking deadline (whichever is sooner)
 - Submitting the results for ranking + OT4 form (Tournament Report) within 7 days or by the ranking deadline (whichever is sooner)
 - Submitting participation monitoring data on OT5 form (Tournament Levy Remittance) within 7 days or by the ranking deadline (whichever is sooner)
 - That the Tournament Approval Panel (TAP) reserve the right to withdraw approval if any information in this application is inaccurate or changes
- I can confirm that the date has been discussed with the County where the applicant/ host is based (and attach this dialogue for information)
- I can confirm that the date has been discussed with the County where the event takes place (and attach this dialogue for information)

Signed:

Name:

TTID number:

Date:

Club/ League/ County Name:

Club/ League/ County TTID number:

(For an officer of a PremierClub/ Associate Club/ League/ County)

OR

Signed:

Name:

TTID number:

Date:

Registered Team name (if applicable):

Registered Team TTID number (if applicable):

(For a Registered Team/ Individual Member/Technical Official)