



# Table Tennis Talent Development Program Application Form

Please fill out this application form and submit to Mrs. Wen Hsu at [HWGlobalFoundation@gmail.com](mailto:HWGlobalFoundation@gmail.com).

Student Name \_\_\_\_\_ Birthdate (mm/dd/yy) \_\_\_\_\_ Gender \_\_\_\_\_

Attending School Name \_\_\_\_\_ City \_\_\_\_\_ Grade Level \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Father's Name \_\_\_\_\_ Telephone \_\_\_\_\_ Email \_\_\_\_\_

Mother's Name \_\_\_\_\_ Telephone \_\_\_\_\_ Email \_\_\_\_\_

1. How long has your child been playing table tennis? \_\_\_\_\_

2. How much table tennis does your child play each week? \_\_\_\_\_

3. Has your child had any formal table tennis training?  Yes  No

If yes, please check any box below that's applicable. What kinds of training?

Group lessons Where? \_\_\_\_\_ When? \_\_\_\_\_  
How often each week \_\_\_\_\_? How long is each class? \_\_\_\_\_

Private lessons Where? \_\_\_\_\_ When? \_\_\_\_\_  
How often each week \_\_\_\_\_? How long is each class? \_\_\_\_\_

Coach's Name \_\_\_\_\_ Phone : \_\_\_\_\_

Camps Where? \_\_\_\_\_ When? \_\_\_\_\_  
For how long \_\_\_\_\_?

Others: (Please specify) \_\_\_\_\_

4. Your goals / expectations for your child in table tennis: \_\_\_\_\_

5. Why do you want your child to join the Talent Development Program? \_\_\_\_\_

6. What other activities does your child participate in regularly: \_\_\_\_\_