

# Summer Chess Camp Registration Form

Please Print Clearly

Name: \_\_\_\_\_

Street address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_



E-mail: \_\_\_\_\_

Please list parents or guardians names and any relevant phone numbers (such as cell or work) we should use in case of an emergency.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Person's  
Authorized  
For Pick-up

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Any **food allergies** or **medical conditions** of which we should be aware? If yes, please detail on back of form.

Circle One  
Yes No

This Fall, what school and grade will you be in?

School: \_\_\_\_\_

Grade: \_\_\_\_\_

T-shirt size: Youth  
M L

Adult  
S M L XL

**Skill Level** (Check): \_\_\_\_\_ Beginner \_\_\_\_\_ Intermediate \_\_\_\_\_ Advanced

If you are a USCF member

ID number: \_\_\_\_\_ Exp: \_\_\_\_\_ Rating: \_\_\_\_\_ (approximate ok)



Parent's  
Signature: \_\_\_\_\_

Date: \_\_\_\_\_