

◆ Tournament _____ Schedule _____ Section _____

Name (First, Middle initial, Last) ◆ _____ U.S.C.F. ID. (◆ If member) _____

Expiration date _____ Rating _____ 1/2 point byes if available (circle rounds) 1 2 3 4 5 6 7 8 9 .

(For Scholastic Tournaments) School _____ Grade _____

♥ All who are joining the U.S. Chess Federation must provide information in this box

And please fill in this box if information has not been given on this style of form in the past or if there has been a change.

Birth Date _____

Street _____ City _____ State _____ ZIP _____

Phone #(_____) _____ e-mail address _____

Entry Fee: \$ _____

U.S. Chess Federation membership Fee. (circle one) **new** or **renewing** . \$ _____

◆ Required information to enter the tournament. TOTAL: \$ _____

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