

**BRINKER PTA CHESS ENRICHMENT CLASSES – Winter 2011 (Session III)**

Brinker Chess Club meets on Tuesdays and Thursdays from 4:00pm to 5:15pm in the school library.

Instructor: Coach Bobby Hillman is a staff member at Plano West Senior High and has been teaching chess to Brinker students for years. He is a USCF-certified chess instructor.

Materials: Chess sets are provided.

Cost: Cost includes instruction, membership in the USCF and the entry fee for a tournament. **Payment & registration form/waiver must be delivered to Brinker front office before first day of class.** Checks should be made payable to "BRINKER PTA."

**Student's name** \_\_\_\_\_ **Teacher** \_\_\_\_\_ **Grade** \_\_\_\_\_

SESSION II (6 classes) Please select only one day.

\_\_\_ Tuesday Class: January 24th to February 28<sup>th</sup> \$112.50

\_\_\_ Thursday Class: January 26th to March 1<sup>st</sup> \$112.50

Tournament for all Brinker Chess students: March 3, 2012 at Plano West Senior High, Presentation Room

**Would you like for your child to be enrolled as a member of the United States Chess Federation?** Enrollment is included in the fee. Please select the membership you'd like your child to receive (*If your child is already enrolled in Brinker Chess Enrichment Classes, please do not fill out again.*)

\_\_\_ I do NOT wish for my child to be enrolled in the USCF

\_\_\_ Yes, please enroll my child in the Premium Scholastic Membership (Age 12 and Under) Includes 6 issues per year of Chess Life for Kids, the right to earn a chess rating in the official national rating system.

\_\_\_ Yes, please enroll my child in the Regular Scholastic Membership (Age 12 and Under) Includes online access to Chess Life for Kids, the right to earn a chess rating in the official national rating system.

**Where will your child go after class?**

\_\_\_ Picked up promptly in front of building      \_\_\_ PASAR after-school program

I acknowledge and understand that the participating groups and instructors shall not be liable nor do they assume responsibility for injury or accident which may occur to the child during class; and I thereby release and hold harmless the participating groups, sponsors, instructor and all other persons and entities associated directly or indirectly from injury, damage, or loss. I have read and agree to the terms, costs, conditions, and refund policies stated hereon.

Parent/Guardian's signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian's name (please print) \_\_\_\_\_

Cell/Work phone # \_\_\_\_\_ Home phone # \_\_\_\_\_

E-mail address(es) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

For USCF Membership Only- Child's Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_

Allergies/special information \_\_\_\_\_

Questions? E-mail Lori Beeler at [lbeeler@brinkerpta.org](mailto:lbeeler@brinkerpta.org).