

BRINKER PTA CHESS ENRICHMENT CLASSES – Spring 2011

Brinker Chess Club meets on Tuesdays and Thursdays from 4:00 to 5:15pm in the school library. Each participant should select only one day.

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 IV (6 classes)

___ Tuesday Class: March 29th to May 3rd \$112.50

___ Thursday Class: March 31st to May 5th \$112.50

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:

___ 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.