

Chess Club Registration Form

Date Purchased: _____ \ _____ \ _____
yyyy \ mm \ dd

Club Name: _____

Player Name _____

Male / Female

Date of Birth: : _____ \ _____ \ _____
yyyy \ mm \ dd

Complete Mailing Address _____

City _____ Prov. _____ Postal Code _____

E-mail Address _____ Phone number _____

- CFC/ACA/Club Membership \$ _____ Notes: _____
- Club/ACA Membership only \$ _____ _____
- CFC/ACA Membership only \$ _____ _____
- Tournament Entry fee \$ _____
- _____ \$ _____ (ACA fee is \$5 for adults and \$3 for juniors 20 and under. Non CFC
- Total Collected \$ _____ club members pay \$2 if adults and \$1 if juniors. Fees included in total.)

Paid by: Cash/Cheque/Other _____ If under 18 years of age Parent/Guardian Name _____

Personal information provided upon registration will be collected and protected under the Alberta Protection of Information and Privacy Act. Collection is used to maintain records for enrolment in Alberta Chess Association and corresponding with registrants. Personal information may be used or disclosed for other operational purposes that are consistent with the requirements of federal or provincial legislation. Participant's name and photographs may appear in Association's newsletter and on the website. For further information, please contact the Executive Director of the ACA Vladimir Pechenkin at 780.913.2775.

Signature of participant (guardian for under 18): _____

Fees Collected by: _____