

A Wisconsin Scholastic Chess Federation Event

3rd Annual

Sheboygan County



Grade Level Championships



When: **Saturday March 15, 2014.** Check in from 7:45 to 8:30 am. Round 1 to begin between 9:15 and 9:30. Awards ceremony after fifth round between 3:00 and 4:30.

Where: **Plymouth High School** 125 South Highland Ave Plymouth, WI 53073

Tournament: 5 Round Swiss, G30/d5 10 Divisions, Grades K, 1,2,3,4,5,6,7,8, HS (9-12)

This tournament is open to all students in public, private and home schools in Sheboygan County.

Awards: **K** through **8th** Grade

Five individual trophies per grade and 2 team trophies per grade.

Medals to all

High School

One individual trophy per grade in a combined section and 2 team trophies and medals to all.

Teams: Teams are composed of least two students from each school and the top 3 scores from each team will be used to determine team winners.

Cost: **\$10** with registration and payment on line before Thursday February 27 at 11:00 pm, **\$15** on line by Thursday March 6 at 11:00, **\$20** on line by Thursday March 13 at 11:00 pm and **\$25** onsite registration. Teams can register by mail to: WSCF Sheboygan Gradelevel Tournament 2819 W. Highland Blvd Milwaukee, WI 53208. See attached form. Entries must be postmarked by above dates. If registering by mail between March 6 and March 13 then registrations must arrive by March 13. Please do not pay by echeck via Paypal after March 10th. Those registrations do not show up online till after the deadline. Please only use a credit card after March 10. Every participant will receive a free event t-shirt pending corporate sponsor.

For More Information: Contact Mike Altman at 920-927-6497 at mgaltman88@gmail.com or Bob at 262-573-5624 or bob@wisconsinscholasticchess.org.

Inclement Weather: Go the WSCF's Facebook page <http://www.facebook.com/WSCFchess> on the day of the tournament after 7:00 am to see if the tournament has been postponed, delayed or canceled.

WSCF is a 501(c) 3 non-profit dedicated to promoting Chess as an educational tool for students throughout Wisconsin.

----- WSCF 2819 W. Highland Blvd, Milwaukee WI 53208, 262.573.5624 -----

Single Student Mail in Registration Form

Name _____ Grade _____
(students may only play in there grade and may not play "up" in this tournament)

School _____ City _____

Student Address _____ Zip _____

Student/Parent Email _____ Phone _____

Parent/Coach Consent and Release

I request that my child be permitted to participate in this event. If I am not the parent or legal guardian of this child, I represent that I have been given the authority by the parent or legal guardian Of this child to agree to the following provisions. I fully understand that it is my or my representative's Responsibility to supervise my child during this event. I hereby give permission for the Wisconsin Scholastic Chess Federation (WSCF) and its assignees to photograph, videotape or otherwise record my child during this event and to use such images for future publicity, including in printed promotional Materials and on WSCF's website. I acknowledge that I will not receive any compensation or have any Claims in connection with such use. I further consent to the publication of my child's individual Tournament results/scores. I hereby agree to release, discharge, indemnify and hold harmless WSCF and each of their respective officers, directors, employees, volunteers, and agents from and against any and all claims, damages, loss, liability, injury, charges or expenses in any way arising out of my Child's participation in this event. Should it be necessary for my child to have medical treatment while participating in this event, I hereby give the supervisory personnel permission to use their judgment in obtaining medical services for my child, and I give permission to the physician selected by such Personnel to render medical treatment deemed necessary and appropriate.

Parent/ Coach/Adult Signature _____

Register via mail to WSCF Sheboygan GL 2819 West Highland Blvd Milwaukee, WI 53208

Team Mail in Registration Form

Coaches: please have parents sign the above release.

School Name _____ Coach _____

Address _____ City _____ Zip _____

Student

Grade

1) _____

2) _____

3) _____

4) _____

5) _____

6) _____

7) _____

8) _____

9) _____

10) _____

11) _____

12) _____

13) _____

14) _____

15) _____

16) _____

17) _____

18) _____

19) _____

20) _____

Check Enclosed \$ _____

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