2019 Little Elementary School Chess Tournament Saturday, October 5th, 2019



Little Elementary School

3721 Little Road Arlington, TX 76016

Open to: Open to all K-12 players in Fort Worth, Denton, Dallas, and surrounding areas.

6 Sections: <u>Un-Rated Sections</u> USCF Membership **Not** Required

Lower Elementary K-3
Upper Elementary 4-5/6
Middle School/High School

USCF Rated Sections USCF Membership Required

4.) USCF Rating Under 5005.) USCF Rating Under 10006.) USCF Rating Over 1000

October USCF Ratings Supplement Used to Determine Sections

Format: 5 Round Swiss, non-elimination. Round 1 starts at approximately 9:00 AM. All others

ASAP. All rounds G/30, 5 Second Time Delay.

Awards: Trophies: Top 5 individuals and top 2 teams (2-4 players). Medals will be awarded to all

participants that do not win a trophy.

Registration Options

On-line: Using the on-line registration option helps me **immeasurably**.

\$15 before Thursday October 1, 2019 at 8:00 PM. After October 1, 2019 at 8:00 PM

register on-site (8:00-8:45 AM the day of the event) \$30.

On-line Registration Link: https://littleelemchesstournament.eventbrite.com

Mail In: Use the form on next page. Entries postmarked before October 1, 2019 - \$15. **Do not**

mail after October 1, 2019. Afterward register on-line until the cutoff (see On-

Line above) or register on-site.

Checks or Cash: If paying by check/cash give the check/cash and registration form to Mrs. Lang

OR Mr. Gillispie.

Chess Questions: Tom Crane; Phone: 817-296-4287; e-mail: tcrane5000@gmail.com

School Questions: Holly Lang; e-mail: hlang@aisd.net

Lunch/Drinks: Lunch & drinks are available for purchase at the school. Participants may bring

sack lunches.

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Entry Form: 1. Please print clearly. 2. MAKE CHECKS PAYABLE TO: Little Elementary School.

3. Either give the check and registration form to Mrs. Lang or Troy Gillispie or Mail check and registration form below to: Tom Crane, 919 Bridges Dr., Arlington, TX 76012. Do not mail after 10/1/2019

Last Name:		First:			MI:				
Address:			_ City:			Zip:			
Age: Birth date:		Grade:	Sch	nool:_					
Email:		Tele	phone:						
If USCF ID, Number	R	ating:		US	SCF expi	ration date:			
Bye requested (optionalcirc	le one)	1 2	2	3	4	(no bye in 5 th round)			
Section entered (requiredci	rcle one)								
	<u>Un-Rated Sections</u>								
	1.) Lower Elementary K-3								
	2.) Upper Elementary 4-5/6								
	3.) Middle School/High School								
<u>USCF Rated Sections</u>									
	4.) USCF Rated U500								
	5.) USCF Rated U1000								
	6.) USCF Rated Over 1000								
Payment: \$									