

National Chess Day!
“SPA-EDDIE DINNER 6” Open OCT. 8, 2016

Sponsored by Kingsville Chess Academy

Limited space-Participation will be guaranteed to the first 26 entries.

EACH PLAYER MUST HAVE THEIR OWN SET- NONE WILL BE PROVIDED

- WHAT:** United States Chess Federation (U.S.C.F.) Rated Tournament. 4-Round Swiss in 2 Section: USCF current membership required Requested byes must be done before end of 1st rd. Time Controls: Game/45 :d5 Must play all rounds to collect prize. No computers may register, rule 11H1 will be observed. TD reserves right to reduce rounds or combine sections if one does not make, then only the section that makes by end of regular registration will awarded.
- WHERE:** **Rockport Fulton Area, HEB Lodge** 5602 Highway 35 N., Rockport, Texas 78382 HEB campground. If You drive on Copano Bay bridge, you've gone too far, turn around
- WHO:** Anyone who wishes to compete under US CHESS Rules and regulations and is currently a member of USCF. Must show proof of membership.
- COST:** \$20.00 registration to play. Entry fee must be paid for regular registration by 5 pm Wed 5th of Oct.
- ROUNDS:** Round 1 starts at 10:00 am. **Please arrive by 9:30 to check in.** Following rounds will be at: as soon as possible. On-site registration will require ½ pt bye and \$30 entry fee
- FOOD:** Lunch will be provided: Spaghetti and, garlic bread, fruit dessert, sodas and water. Any other libations will be at the discretion of the player and not the responsibility of the sponsor.
- PRIZES:** Money prizes: Based on 20 entries in each section, (\$70 for first, \$50 for second, \$30 for third) Prize presentation ASAP after last rd. Due to the fact that I have to buy groceries e-mail registrations will not be accepted without the entry fees. Players will not be registered until entry fee is collected.

Mail checks payable to:

Eddie Rios

Mail registration with payment to:

Eddie R. Rios Sr.

213 E. Fairview

Kingsville, TX 78363

For questions call Eddie Rios –cell phone (361)455-3682 or email riose@nwcable.net

PLEASE WRITE CLEARLY SO WE CAN PROCESS ENTRY CORRECTLY. On-site registration 8.45 to 9:20

USCF Membership Status (Please circle one): Current Need to Join or Renew—including USCF Fees please

USCF Number: _____ Rating: _____ Expiration Date: _____

Last Name: _____ First Name: _____ MI: _____

Address: _____

City, State, Zip: _____

Phone Number: (_____) _____ E-mail address: _____

Requested Bye Rounds, if any: _____ (½ pt for first bye requested, 0 pt for subsequent byes)

2 sections 8 player min per section: circle one: championship under 1000

ADA accommodations requested: _____

Amount enclosed: Entry fee USCF MEMBERSHIP FEE _____ Total: _____

Note: No entry will be processed without the funds included. Incomplete forms will have an extra \$5 fee

Bring your own clocks AND sets—none will be provided Oct supplement will be used-spa-eddie6