

Summer Chess Camp Registration Form

Montessori School of Bowling Green

June 21st – 25th, 2010 (9am-12pm M-F)

Camper's Name _____ Male _____ Female _____

Grade entering Fall 2010 **K** **1** **2** **3** **4** **5** **6** **7** **8**

School attending in the Fall _____

Level of Chess Play: (See Placement Form)

Beginner Intermediate I Intermediate II Advanced

Time of Program: 9-12 AM (ALL levels)

Location: Montessori School of Bowling Green, 515 Sand Ridge Rd. Bowling Green, OH

T-shirt size: Youth - S (6-8) M (10-12) L (14-16) Adult - S M L

Home Address: _____

Contact e-mail address: _____

(You will not receive a confirmation if you do not provide an e-mail address.)

Parent (Guardian) Name	Primary Phone #	Alternative Phone #
Emergency Contact	Relationship	Phone Number

Any known allergies? _____

Any health issues of which we should be aware? _____

Physician Name _____ Physician Phone _____

Parent/guardian signature _____

Are you interested in volunteering? (rebates given to families that assistance us) _____

If yes, please provide name and contact number:

Cost: \$95/1st camper \$85/sibling (late registration after 6/7/10 add \$10)

Register by June 7th or the late fee will be added.

You will receive confirmation for the camp by June 9th via e-mail. Checks for camp should be made payable to the *Montessori Chess Boosters Club*. Registration form and check may be mailed to:

Montessori Chess Boosters Club
P.O. Box 835
Bowling Green, OH. 43402

Amt enclosed _____

Any questions can be addressed to Coach Jim VanVorhis at jim@windrivertours.com.