Southwest Collegiate Championship Registration Form

Southwest Collegiate Championship Registration Form

Name:					
				Name <u>:</u>	
Address:				Address:	
City:	St:	Zip:		City:	St:
College <u>:</u>		DOB:		College <u>:</u>	
College Location:				College Location:	
Contact at tournament Phone:or Email:				Contact at tournament Phone:	
USCF id:Rating:				USCF id:	
			n Febuary Supplement		
USCF Expiration Date:				USCF Expiration Date:	
Circle rd bye is needed.	one allowed: 1	2 3	4 5	Circle rd bye is needed,	one allowed:
Circle Schedule	2 day	3 day		Circle Schedule	2 day
Entry Fee: (\$49 by 1/27, else \$69)				Entry Fee: (\$49 by 1/27, el	
USCF (if nonmember. This is required! U25 = \$33 or \$26, Adult \$46 or \$40)				USCF (if nonmember. This Adult = \$46 or \$40)	
TCA (Student \$8.50, Tourney Mem included in Entry Fees)				TCA (Student \$8.50, tourney N	
Total				Total.	
Make check to/mail to: Texas Chess Association, c/o Barbara Swafford, 2709 Longhorn Trail, Crowley, TX 76306-4719				Make check to/mail to: Texas Chess Associ Longhorn Trail, Crowley, TX 76306-4719	

St: _Zip: _____ DOB: or Email: Rating: Ratings from February Supplement llowed: 2 3 4 5 1 2 day 3 day oy 1/27, else \$69) nber. This is required! U25 = \$33 Or \$26, or \$40) , tourney Mem included in entry Fees) ness Association, c/o Barbara Swafford, 2709