Ken Smith Memorial Championship Registration Form	Ken Smith Memorial Championship Registration Form
Name:	Name:
Address:	Address:
City: St: Zip:	City: St: Zip:
USCF ID: Exp: Rating:	USCF ID: Exp: Rating:
Email:	Email:
Check the appropriate Schedule: □ 2 day □ 3 day	Check the appropriate Schedule: □ 2 day □ 3 day
Circle the round(s) in which you would like a bye: 1 2 3 4 5 (Two ½ point byes allowed, but not for both rd 4 and rd 5.)	Circle the round(s) in which you would like a bye: 1 2 3 4 5 (Two ½ point byes allowed, but not for both rd 4 and rd 5.)
Entry Fee (3day \$81 2day \$80 by 4/15 else \$95)	Entry Fee (3day \$81 2day \$80 by 4/15 else \$95)
USCF Membership: Reg \$40, 1 st time \$25, <20 \$25, <15 \$19 if joining or renewing please give date of birth: //	USCF Membership: Reg \$40, 1 st time \$25, <20 \$25, <15 \$19 if joining or renewing please give date of birth: //
Total Make Checks payable to Dallas Chess Club, c/o Susan Breeding, 7909 La Guardia Drive, Plano TX 75025.	Total Make Checks payable to Dallas Chess Club, c/o Susan Breeding, 7909 La Guardia Drive, Plano TX 75025.
Paid: □Cash □Check num: □Credit Card code:	Paid: □Cash □Check num: □Credit Card code:
Received by:	Received by: