

**FILL OUT BY CHILD AND RETURN TO SCHOOL**

Child's name \_\_\_\_\_

Grade/Room # \_\_\_\_\_ / \_\_\_\_\_

**Check only one:**

\_\_\_\_\_ I have never played Chess before and don't know the rules of the game.

\_\_\_\_\_ I know how the pieces move, but not much else.

\_\_\_\_\_ I know all the rules, but I'm not very good.

\_\_\_\_\_ I think I am already a good chess player

*PLEASE WRITE AN ANSWER TO THE FOLLOWING QUESTION:*

**Why do you want to be in Chess Club?**

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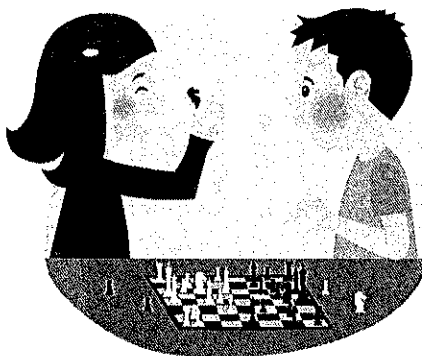
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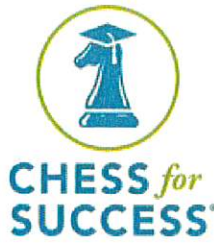
**PLEASE RETURN THIS FORM  
TO THE SCHOOL OFFICE**

OVER 

Open to grades 2-5

Start date: Nov. 6th

Chess for Success will meet in the Lewis Library



Chess for Success Permission Slip

School: Lewis Elementary

Grade: \_\_\_\_\_ Coach: Barbara Little

Chess club days: Monday and Wednesday Chess club times: 3:15--4:15

The chess club at your school is sponsored by Chess for Success. In addition to the school permission slip, please complete this Chess for Success permission slip and return to your child's chess coach.

I give permission for \_\_\_\_\_ to participate in the chess club. I understand that my child's participation is dependent on appropriate student behavior. I understand that I, or the school, am responsible for my child's transportation. Chess for Success does not provide transportation to / from chess club or tournaments.

Parent / Guardian (Print): \_\_\_\_\_

Parent / Guardian Signature: \_\_\_\_\_

Chess for Success occasionally takes photos at the clubs and tournaments. Please sign below if you are willing to allow your child to be photographed by Chess for Success.

I hereby grant to Chess for Success the irrevocable and unrestricted right to use and publish photographs of my child or in which my child may be included, for Chess for Success publications, electronic reproductions (web-sites) and / or promotional materials or any other purpose and in any manner or medium. In addition, I grant my permission to alter the same without restriction; and to copyright the same. I hereby release the photographer and Chess for Success from all claims and liability relating to said photographs.

Parent / Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Child's T-shirt size: \_\_\_\_\_

If you would like to receive information and newsletters about the Chess for Success program please give us your contact information. (please print.)
Name: \_\_\_\_\_
Address: \_\_\_\_\_
Zip code: \_\_\_\_\_
Home phone: \_\_\_\_\_
Cell phone: \_\_\_\_\_
E-mail: \_\_\_\_\_

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