

2016 OCBCF "Fall Classic" Tournament sponsored by Dr. M.L. Garza- Gonzalez Charter School



Come and celebrate National Chess Day



October 8th 2016

Sanctioned by the United States Chess Federation (USCF)

WHAT: United States Chess Federation (U.S.C.F.) Sanctioned Tournament. USCF 6th edition rulebook. 5-Round Swiss in 4 Sections: Primary (K-3), Elementary (K-5/6), Middle School (K-8) and High School (K-12). Time Controls: Game/30;d5 (Thirty minutes per side per game with a 5-second delay if clocks permit)

WHERE: Dr. M.L. Garza- Gonzalez Charter School: 4129 Greenwood Drive, Corpus Christi, TX 78416

WHO: All students grades K through 12. Students who register for sections above their grade level play as individuals only and are not eligible for team trophies.

COST: \$15.00. You can pay for the tournament registration by check or cash at the tournament site. USCF membership required: \$17 for Scholastic (ages 12-under), or \$22 for Youth (ages 13 -15) \$26 for Young adults (age 16 – 24). Please pay appropriate USCF fees online/on-site OR show proof of current membership for each player.

REGIST.: Registration will be handled via email and onsite. You are required to submit your entries via email by to ocbchess@gmail.com by 5.00 pm, Oct 7th. For large school teams, coaches can email a spread sheet with all their players' names and USCF IDs to ocbchess@gmail.com by 5:00 pm, Oct 7th.

ROUNDS: Round 1 starts at 9:00. Please arrive between 8:00 and 8:30 to check in. All other rounds will follow as quickly as possible.

PRIZES:	Primary:	Trophy: Top 2 teams; 1st – 5th individual	Medals to 6th - 8th
	Elementary:	Trophy: Top 2 teams; 1st – 5th individual	Medals to 6th - 8th
	Middle School:	Trophy: Top 3 teams; 1st - 5th individual	Medals to 6th - 8th
	High School:	Trophy: Top 2 teams; 1st - 3rd individual	Medals to 4th - 8th

Email information requests to OCBChess@gmail.com

USCF Number: _____ Expiration Date: _____ Rating: _____ or Unrated _____

Last Name: _____ First Name: _____ MI: _____

Street Address/City/State/Zip Code: _____

School: _____ Grade: _____ Date of Birth: (mm/dd/yy) _____

E-mail address: _____ OK to send info on more tournaments? Yes No (circle one)

Section (circle one): K-3 (Primary) (K-5/6) Elementary Middle School High School

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

Requested Bye Rounds, if any: (1/2 point for first bye requested; 0 points for subsequent byes) _____