2017 SCI TEAM REGOINAL

REGISTRATION FORM FOR GRADES K-8 ONLY

School _____

School Address _____ **County** _____

City _____ ZIP_____ **School** Phone _____

DO NOT LIST YOUR PLAYERS – LIST ONLY THE NUMBER OF TEAMS COMPETING.

1. Division(s) you are entering: _____ 8th Grade & Under _____ Number of teams

   _____ 6th Grade & Under _____ Number of teams

   _____ 3rd Grade & Under _____ Number of teams
2. Your choice of Regional location for 8th & Under, 6th & Under, and/or 3rd & Under. (All teams from your school must attend the same regional.)

   _____
   (List location: Goshen, Hammond, Indianapolis, Mt. Vernon or Terre Haute)
3. Team Sponsor/coach to act as a contact for team(s).

   _____ _____
   (name) (area code + number)

   _____
   (email)
4. The entry fee is $48.00 per team. (Number of teams x $48):

   $_____ 8th Grade & Under

   $_____ 6th Grade & Under

   $_____ 3rd Grade & Under

   _____ Total enclosed
5. Mail this form and a check for the entry fee(s) to:
   PLEASE NOTE A NEW MAILING ADDRESS FOR THIS EVENT

   Scholastic Chess of Indiana
   8927 Waterside Circle
   Indianapolis, IN 46278

CHECKS SHOULD BE MADE PAYABLE TO: **SCHOLASTIC CHESS OF INDIANA**

Mailing Deadlines: FOR ALL REGIONALS – Mailing Deadline is February 9, 2017.

Online registration will continue until February 16 (Mt. Vernon), February 23 (Goshen and Hammond), and March 2 (Indianapolis and Terre Haute).