

# CHESS MATES FOUNDATION

"Providing children with opportunities to learn live skills for today's world."

## STUDENT REGISTRATION FORM

SCHOOL NAME: \_\_\_\_\_ GRADE: \_\_\_\_\_

STUDENT NAME: \_\_\_\_\_

PARENT/GUARDIAN NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

DAYTIME PHONE: \_\_\_\_\_ EVENING PHONE: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

Chess Club Schedule: Wednesdays, 3:40-4:40, Brookside School, beginning 10/12/2011 in room 106.

Yes, I am able to volunteer and support the program.

No, I am not able to volunteer.

FEES: \$85 per child per school year

Check enclosed  My child is on the school's free or reduced lunch program (payment waived)

I would like to sponsor a child who can't afford the fee (tax deductible donation)

I give my permission for my child to participate in Chess Mates' after-school chess program.

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

Chess Mates Foundation is a Washington State 501(c)(3) nonprofit organization. We are funded through individual donations and from grants. All donations are tax deductible.

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