



# Chess Adventures Registration Form

Thank you for choosing to be a part of Chess Adventures and our efforts to educate children through the exciting, mind stimulating game of chess. Below you will find our fees and times for classes. Please choose the class time that best fits you or your child(s) schedule. You can register directly on our website by visiting the link below and selecting "ENROLLMENT".

## Enrollment

**\*\*\*PLEASE DO NOT TURN THIS FORM IN TO YOUR CHILD'S SCHOOL. EMAIL OR FAX TO CHESS ADVENTURES OFFICE ONLY\*\*\***

Fees for enrollment are \$40 per month for first or second hour. Tuition is charged via automatic draft on a monthly basis on the first of every month. 1<sup>st</sup> hour class is 3:00pm-4:00pm, 2<sup>nd</sup> hour class is 4:05pm-5:05pm Weekly. Tuition for both classes combined is \$80. Class for two students is \$80, three students is \$90. **\*Classes are for Ages (5-Up)**

## Dates & Times

Chess Adventures meets one day per week. The meetings are broken up into two

(1) Hour sessions. Your child may participate in both sessions for enhanced learning.

\*\*\* The same Material is not covered in both sessions

\*\*\* Please be ready for pick-up immediately following class

\*\*\* Awards Days are held at the end of each semester. Parents will be notified.

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This school only offers the first hour at this time. Open enrollment, you may enroll your student(s) at any time – even after classes start.

Facility Name	1 <sup>st</sup> Hour	2 <sup>nd</sup> Hour	Both Sessions
	3:00pm-4:00pm	4:05pm-5:05pm	3:00pm-5:05pm
	\$40/month	\$40/month	\$80/month

**Student Name** \_\_\_\_\_ **Grade** \_\_\_\_\_ **T-Shirt Size** \_\_\_\_\_

**Parent/Guardian** \_\_\_\_\_

**Home #** \_\_\_\_\_ **Mobile #** \_\_\_\_\_ **Work #** \_\_\_\_\_

**E-Mail Address** \_\_\_\_\_

(E-mail is an alternate form of communication with parents. We will NEVER sell or distribute your email address)

**Emergency Contact** \_\_\_\_\_ **Relationship** \_\_\_\_\_

**Emergency #** \_\_\_\_\_ **After Care** ☐ **Parent Pick Up** ☐

**I wish to pay by (circle one):** Visa / MasterCard / Amex / Discover (amount) \$ \_\_\_\_\_

**CC Number:** \_\_\_\_\_ **Expiration Date:** \_\_\_\_\_

**Name On Card:** \_\_\_\_\_ **Verification #** \_\_\_\_\_ **Zip Code** \_\_\_\_\_



Please fill out & Email or fax to: Chess Adventures 8920 Eves Rd. #768663 Roswell, Ga. 30076

**NO CHECKS OR CASH PAYMENTS**

**Website:** [www.chessadventures.org](http://www.chessadventures.org) **Email:** [chessadventures@gmail.com](mailto:chessadventures@gmail.com) | **Phone:** 470-363-4780 | **Fax:** 770-710-0498