



Cockeysville Community Chess Center 2017-2018 Adult Chess (18+)

Cockeysville Recreation Council Sponsored By CRC Summer Chess Camp Programs

The Cockeysville Community Chess Center is designed to provide a place for people of all ages to come and play chess. It will be held at Cockeysville Middle School in the Cafeteria on selected Fridays throughout the year from 7:00 - 9:30. Play standard chess, quick chess, blitz, bughouse, and more. Make connections with other chess players in the community. The center will be open to individuals and families, youth and adults.

Program Dates (subject to change):

Session 1 (Fall/Winter): 9/22, 9/29, 10/13, 11/3, 11/10, 12/1, 12/8, 12/15

Session 2 (Spring): 1/12, 2/2, 2/16, 3/2, 3/16, 4/6, 4/27, 5/11, 5/25



Three Ways to Participate:

- ~ Pay as you go (\$5.00 per week)
- ~ Pay for either full session (\$30.00)
- ~ Pay for both sessions (\$55.00)

Participants should bring their own sets if they have them. Some sets and clocks may be available for use.

Checks should be made payable to Cockeysville Recreation Council Chess.

Mail registration and payment to: CRC Chess: ATTN Glenn Segal 10401 Greenside Drive, Cockeysville, MD 21030.

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COCKEYSVILLE COMMUNITY CHESS CENTER REGISTRATION FORM

Registrant: _____ Email Address (print neatly) _____

Phone #: _____ Novice _____ Intermediate _____ Advanced _____

____ Pay as you go - \$5.00 each week ____ Pay for one session - \$30.00 (__F __S) ____ Pay for entire program - \$55.00

ACKNOWLEDGEMENT, WAIVER AND RELEASE OF LIABILITY:

In case of injury or emergency, I for myself and/or participant (if participant is minor/child), and my personal representatives, heirs and assigns, (severally and collectively "I" for this registration form) give permission for an activity representative to call 911 and transport participant to a hospital. I shall inform the Recreation Council, in writing, of any medical or health conditions of participant that occurs or develops and which could affect participant's safety, performance or participation in or throughout the activity.

I hereby confirm participant is in good health and able to participate in the activity. I acknowledge the activity may involve risk and danger of bodily injury or death. I fully accept and acknowledge the activities may involve risk, and I hereby assume the risk and responsibility for all dangers and risks associated with the participant in the activity. I further understand that concussion information is available at www.cdc.gov/concussion I acknowledge Baltimore County, Maryland, the recreation council, and their respective employees, directors, officers, volunteers, members and any other participant, entity, party or person involved in any regard with the activity or the activity premises and their respective agents, personal representatives, heirs, employees, contractors, successors and assigns (each on "activity representative" and collectively the "activity representatives"), shall not be responsible or liable in any regard or manner for any and all property damage or bodily injury (including serious physical injury or even death) incurred by participant or any party related thereto as a result of his/her participation in the activity.

I have read, fully understand, and hereby freely sign, approve of, and agree to the terms of this registration form. I hereby unconditionally release, discharge, covenant not to sue, waive my rights and remedies, and agree to hold harmless the activity representatives from any and all claims, costs, demands, losses, damages, or expenses associated with, in whole or in part, participant's involvement with the activity. I certify all answers and information provided on this registration form are to the best of my knowledge true and correct throughout the activity. I shall inform the recreation council in writing if any information provided in this registration form is incorrect or changes through the course of the activity. I understand Baltimore County and/or the recreation council do not perform criminal and/or background checks on activity representatives. I shall present a government-issued photo identification card including, but not limited to, my driver's license, passport, or United States Visa to the activity representative for review, if requested, at the time I submit this registration form to the recreation council.

CHILD CARE This program is designed to provide a healthy and enjoyable leisure experience for your child. However, this is not a licensed childcare program and is not designed to provide child care. Therefore, parents are encouraged to discuss attendance expectations with their children. Department staff cannot detain youth wishing to leave at any time. > Weather Cancellations: If schools are closed due to inclement weather all recreation programs are canceled. If there is a snow emergency plan in effect after school hours all recreation programs are canceled. Please listen to WBAL 1090 AM. > > THERAPEUTIC Should you require special accommodations (i.e. sign language interpreter, large print, etc.) please give as much notice as possible by calling the Recreation Office at 410-887-7734 or the Therapeutic Office at 410-887-5370 (voice) or 410-887-5319 (TT/Deaf).>> TRAVEL This program participates in leagues/tournaments governed by a non-recreational council body. Referrals to these organizations are available thru your local recreation office: 410-887-7734

These materials are neither sponsored nor endorsed by the Board of Education of Baltimore County, the Superintendent, or this school or office.