New Bern Noble Knights
Chess Club Application

Application Date: _____

Student Information:

Name: _____ _____ _____ _____
First Middle Last Suffix: Jr. III, Etc

USCF ID: _____ Date Expires: _____ Rating: _____

Unique Email needed ***for student*:** _____
(To access the USCF Membership Area, there must be a Unique Email associated with a USCF ID.)

Nickname / Preferred Name: _____

Mailing Address: _____

_____ _____ _____
City State Zip Code

Phone Home: _____ Cell: _____

Date of Birth: **Month:** _____ **Day:** _____ **Year:** _____ Age: _____ Gender: _____

Name of School: _____ Grade: _____

Family Information:

Parents/Guardians: _____

Address: _____
(PO Box and/or Street)

_____ _____ _____
City State Zip Code

Phones: Cell: _____ Home: _____ Work: _____

Email Contact: _____

Additional Player Information:

A) Number of years of prior chess playing experience? _____
B) Do you own or have access to a chess set? _____
C) Can you play with anyone in your home? _____
D) Do you play chess with anyone at school or in a club? _____
E) Have you ever played On-Line Chess or with an APP _____
F) Why are you interested in participating in the NBNK Chess Club?

G) Do you have any medical conditions or accommodations the Club needs to be aware of?

NBKN Admin: Received By: _____ Date: _____

USCF Membership Sent By: _____ Date: _____

Revised: December 10, 2023