

# 2017 Northern Virginia Open Entry Form

Last Name: _____		First Name: _____		MI: _____	
USCF Member:    YES        NO		<b><i>If Yes</i></b> , write USCF ID Here: _____			
Street Address: _____ _____			Email: _____ Phone: _____		
City: _____, State: _____		Zip: _____		Birth Date: _____	
Optional Bye Request (1 allowed):    Rd 1        Rd 2        Rd 3        Rd 4        Rd 5					
<b><i>Byes for Rounds 1-4 are ½ point, Byes for Round 5 are Zero Point</i></b>				<b>No Byes please!</b>	
<b>Early Entry Fee:</b> <b><i>Checks payable to Virginia Chess</i></b>		VCF    \$10-Adult    \$5-Junior		Total: _____	
		<b><i>(Required of Virginia Residents Only)</i></b>			

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**Mail your completed form and payment to:**

Mike Hoffpauir  
 ATTN: Northern VA Open  
 405 Hounds Chase  
 Yorktown, VA 23693-3356