2019 Northern Virginia Open Entry Form							
Last Name:			First Name:		MI:		
USCF Member:	YES	NO	If Yes, write	If Yes, write USCF ID Here:			
Street Address:				Email:			
City:	, State:		Zip: [		Birth Date:		
Optional Half-point Bye Request (1 allowed): ☐ Rd 1 ☐ Rd 2 ☐ Rd 3 ☐ Rd 4 ☐ Rd 5 ☐ No Byes please!							
			•	\$15-Adult		Total:	
		cut ho					

Mail your completed form BY OCTOBER 26th and your payment to:

Mike Hoffpauir ATTN: NoVA Open 405 Hounds Chase Yorktown, VA 23693