

27th David Zofchak Memorial Open – Nov. 23-24 A VA Chess Federation (VCF) and VCF Cup Event -- 6 GP points.

5 Round Swiss System – G/120, d5 – 2 Sections (Open & U1800)

Location: Sleep Inn Lake Wright; 1521 Premium Outlets Blvd, Norfolk, VA, 23502; (757) 461-6251
Chess rate: \$69+tax w/free breakfast. Located one block from I-64 Northampton Blvd Exit 282.

Prizes: **\$2000 Prize Fund.** All non-upset prizes based on 50 total entries.
OPEN Section: 1st \$500; 2nd \$300; 3rd \$150; U1900 \$100
U1800 Section: 1st \$350; 2nd \$175; 3rd \$125; U1600/U1300/U1000 each \$100
Top Upset: \$75 each section - supplemental ratings used - for a single game in rounds 1-5.

Rounds: Saturday: Rd. 1: 10:00am Rd. 2: 2:30pm Rd. 3: 7:30pm
Sunday: Rd. 4: 9:30am Rd. 5: 2:00pm

Registration: On-Site Saturday from 9:00 – 9:45am. Advance entry list, maps, etc: <http://www.vachess.org>

Entry Fee: **\$65 On-Site:** Cash or Check Sat morning or online 11/21-22 - No Credit Cards On-Site.
\$55 Advanced Pre-Entry: by 11/20, register by mail or online (see "Pre-Pay Options").
Byes: A single half-pt. bye is available up to the start of Round 2, and thereafter irrevocable. Players can register late and start in Round 2 with a half-pt bye as well.

Pre-Pay Options: Pay On-line: Using **PayPal** or a **Credit Card**; use the VCF website: <http://www.vachess.org>
Pay By Mail: Must be received by Nov 20th – mail entry form below and check payable to "VA Chess" to: Zofchak Memorial Open, 1370 South Braden Crescent, Norfolk, VA 23502.

Memberships: Must be a USCF member to play. All VA residents must be VCF members (**\$15 adults; \$8 for Under Age 18**). Both purchasable at registration. Tournament open to non-VA players.

More Info: **No Email Entries Accepted.** Info only: peteronkarl7@aol.com

Entry Form: 27th David Zofchak Memorial		Open: <input type="checkbox"/> U1800 <input type="checkbox"/>	(Check Those That Apply)	Total \$\$: _____
Name:	_____	_____	_____	_____
	<small>Last</small>	<small>First</small>	<small>MI.</small>	
Address:	_____			
City:	_____	State:	_____	Zip: _____
USCF ID:	_____	USCF Exp. Date:	_____	VCF Exp. Date: _____
		<small>mm / dd / yyyy</small>	<small>mm / dd / yyyy</small>	<small>mm / dd / yyyy</small>
Birthdate:	_____			
Phone: (_____)	E-mail: _____			
Make Checks Payable To: " Virginia Chess "	Request half pt. bye for Rd.: _____			
Mail Entry To:	Zofchak Memorial Open c/o Ernest Schlich 1370 South Braden Crescent Norfolk, VA 23502			