

THE SOUTHAMPTON YOUTH BUREAU PRESENTS:

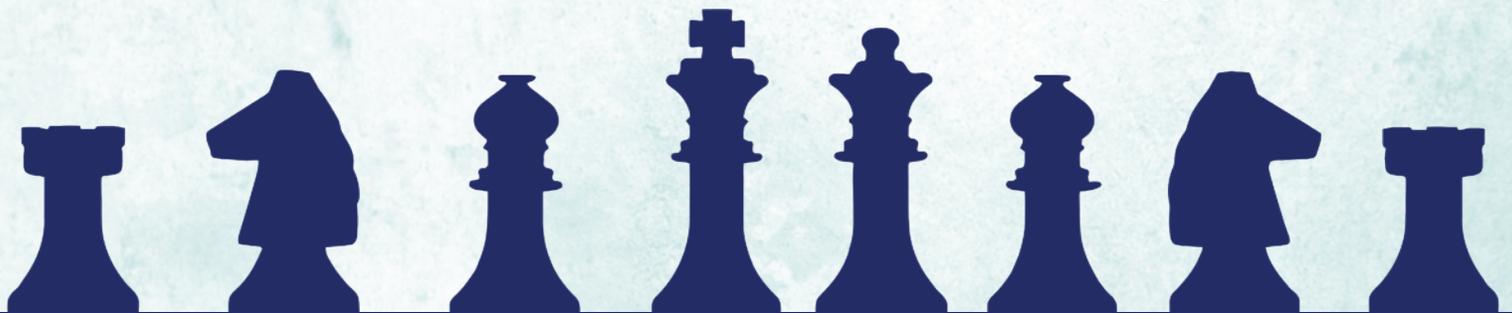


HAMPTONS CHESS CLUB

AT THE DROP SPOT, 655 FLANDERS RD

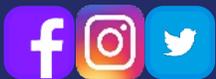
**PARTICIPATE IN FUN & INTERACTIVE CHESS PRACTICES,
WEEKLY CHESS PUZZLES, AND CHESS TOURNAMENTS.**

**FREE! OPEN TO SCHOOL AGE CHILDREN
TUESDAYS FROM 6:00PM - 7:00PM
BEGINNING OCTOBER 25TH, 2016**



**FOR MORE INFORMATION, PLEASE CALL (631) 702-2425 OR VISIT
WWW.SOUTHAMPTONTOWNNY.GOV/YOUTHBUREAU**

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HAMPTONS CHESS CLUB AT THE DROP SPOT

REGISTRATION FORM

Child's Name _____ Grade _____ Date of Birth _____

Parent / Guardian Name _____

Parent / Guardian Email Address _____

Mailing / Street Address _____ Town _____ Zip _____

Home phone _____ (Please circle one)
Work/Cell Phone _____

Emergency Contact Name _____

Home phone _____ (Please circle one)
Work/Cell Phone _____

I give permission for (Child's Name) _____ to participate in the *Hamptons Chess Club* program sponsored by the Town of Southampton Youth Bureau on Tuesdays from 6:00pm - 7:00pm at the Flanders Youth Center, 655 Flanders Rd. In the event of a medical emergency and I cannot be reached, I authorize the Town of Southampton Youth Bureau staff to seek emergency medical treatment. I also consent to photographs being taken of my child, understanding they may be used for promotional purposes.

Signature _____ Date _____

PLEASE MAIL OR HAND DELIVER TO:
SOUTHAMPTON YOUTH BUREAU
116 HAMPTON RD
SOUTHAMPTON, NY 11968