

# *C&O Family Chess Center*

## *2017 Spring Break Chess Program*

**Omar Pancoast III, Director**

**B. Ross Pancoast, Assistant Director**

**217 West Diamond Avenue**

**Gaithersburg, MD 20877-2106**

**Phone 301-963-9122, FAX 240-912-7456**

**[OPancoast3@chesscenter.net](mailto:OPancoast3@chesscenter.net)**

**[www.chesscenter.net](http://www.chesscenter.net)**

To: All Parents and Students,

Welcome to the C&O 2017 Spring Chess Program. Please read, fill out, sign, and return the required forms as soon as possible. **Don't forget that all students should read and sign the agreement at the bottom of the Consent Form.** We have rarely had a problem with students at any of our programs and we hope we can count on all of you to help us keep it that way. Above all, chess programs should be fun for everyone involved. If you have a problem please talk to Coach Omar, Coach Ross, or our program director Carolyn Pancoast.

The enclosed sample schedule is to remind parents and students what is happening during the week and what students should (*and should not*) bring with them. Please keep it handy. We reserve the right to make changes as circumstances dictate, particularly in the afternoon sport/activity portion of the program. We welcome your feedback about what you like or don't like. You can help us to improve our programs and maximize the fun for all!!

*Regular arrival and Pick-up are always at the center and a **PARENT MUST COME IN and SIGN THEIR CHILD IN OR OUT.*** There will be a sign-in and out sheet available. Half-Day students not picked up by 12:15 PM will be charged for unscheduled after-care (\$15 if picked up before 1:00 PM, \$25 after 1:00 PM). Scheduled after-care is available at an additional charge. Full-Day students not picked up at the normal time may be charged the daily rate of \$25 (until 6:00 PM) for unscheduled after-care. Payment is due at time of pickup.

**ALL STUDENTS should bring a preferred snack and bottled water or drink (no soda please) in a re-sealable plastic container with the child's name on it (no glass containers, juice boxes, or soft packs). We will provide water and basic snacks in an emergency.**

**FULL-DAY STUDENTS must bring a lunch and a drink *Please put student's name on lunch boxes, backpacks, etc.*** Students in the Chess & Sport program must wear shoes suitable for running or hiking in the woods (**NO flip-flops or open-toed sandals, crocs, etc.**).

Students should **NOT** bring toys, Game-Boy (or other) electronic games, walk-men, i-pods, or other such equipment. **Full-day students in either program may bring a book to read.**

**ALLERGIES:** If your child(ren) have allergies to animals, food, grass, trees, etc, please make sure they take their medication (if needed) before they arrive. Medication must be labeled with child's name, and be in the original bottle. **PLEASE NO PEANUT PRODUCTS!!!!!!**

**Keep this page for your records.**

# **Full-Day Availability for Single Events**

Afternoon events in the Chess & Sport program ( Bowling, climbing Sugarloaf Mountain, going to Cunningham Falls State Park, or Laser-Tag at Shadowland) have often proved attractive to students who were not registered for that full-day program. Half-day students may be able to join in the afternoon activity for a day *only if the full-day program (including the Pro-Chess program) has space available*. Cost for a single afternoon at Chess & Sport is \$50 (Pro-Chess is \$40). *Parents must check with program staff in advance for space availability and to arrange payment.*

**Parents who are going to be late should notify the center as soon as possible to avoid excess charges.**

## **Before/After-Care Availability and Late Policy**

**BEFORE/AFTER-CARE** is available daily (from 8:00 AM until 6:00 PM), by pre-arrangement, for individual days or an entire week. The cost of scheduled before or after-care is \$25 per day (\$15 for AM), until 6:00 PM. Before care **MUST** be scheduled in advance.

### **LATE POLICY:**

Half-Day students must be picked-up by 12:15 PM each day or they may be charged a late-pick-up fee of up to \$25. In addition, parents who remain out of touch past 1:00 PM may be charged the \$40 fee for an individual full day with the Pro-Chess group.

**Keep this page for your records.**

# *C&O Family Chess Center*

## *Spring Break Chess Program*

Omar Pancoast III, Director  
217 West Diamond Avenue  
Gaithersburg, MD 20877-2106  
Phone 301-963-9122, FAX 301-963-0734  
[www.chesscenter.net](http://www.chesscenter.net)

### **2017 Spring Break Chess Program Medical Release/Consent Form**

(This completed form is required for participation)

Student's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Parent/Guardian Names: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Person authorized to pick-up in an emergency: \_\_\_\_\_ Phone: \_\_\_\_\_

#### **Medical Information:**

Doctor: \_\_\_\_\_

Insurance Carrier: \_\_\_\_\_ ID#: \_\_\_\_\_

PLEASE LIST ALL KNOWN ALLERGIES AND ANY OTHER MEDICAL CONDITIONS OF WHICH WE SHOULD BE AWARE. USE THE BACK OF THIS FORM FOR ADDITIONAL SPACE IF NECESSARY:

---

---

---

I, the undersigned parent (or legal guardian), give my consent for the above named student to participate in the **Spring Break Chess Program** operated by the *C&O Family Chess Center*, Coach Omar Pancoast, and Coach Ross Pancoast. Students may be supervised both by coaches and by other personnel.

I agree that I will not hold the *C&O Family Chess Center* coaches, assistants, volunteers, or other program personnel, liable in the event of an injury or other medical emergency.

In the event of such an emergency I hereby grant permission for my son/daughter to be examined, diagnosed, transported, and/or treated in accordance with standard medical practice by licensed emergency and medical personnel. Furthermore, I agree to accept any and all financial responsibility resulting from such emergencies or their treatment.

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
Parent or Guardian

**Return this form to center.**

# *C&O Family Chess Center*

## **Spring Break Chess Program**

### **Student Responsibility and Consent Form**

(This completed form is required for participation)

#### **Student Responsibilities:**

**ALL students should bring a morning snack and bottled water or a fruit drink (no soda please).** Please make sure it is in a *resealable plastic* container such as a thermos, or having a sipper-top or screw-on cap (**no glass containers, juice boxes, or soft packs**).

**FULL-DAY STUDENTS must bring snacks, lunch and a drink(s).** Chess & Sport students must bring a backpack and must wear shoes suitable for running and hiking in the woods (**NO flip-flops, open-toed sandals, Crocs, etc.**).

Students **SHOULD NOT** bring toys, Game-Boy (or other) electronic games, walkmen, ipods, or other such equipment. Students may bring lap-tops, or other portable computers that can access Chess.com.

I understand that it is MY responsibility to get ready for activities each morning, and to bring all the things I need for the day. I agree to take responsibility for myself each day. I will abide by the rules of normal chess etiquette and all additional program rules and regulations, as instructed or directed by coaches and other program staff. **I also understand that rude, offensive, or dangerous behavior, or other failure to comply with program rules may result in my removal from the program. In this event, tuition will NOT be refunded.**

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
Student

I have read this form and explained it to my child if necessary

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
Parent or Guardian

**Return this form to center.**

# RELEASE OF LIABILITY

## PLEASE READ CAREFULLY-THIS AFFECTS YOUR LEGAL RIGHTS

In exchange for participating in the 2017 Spring Break Chess Program, organized by C&O Family Chess Center, at 217 West Diamond Ave, Gaithersburg, MD 20877 and /or use of the property facilities and vehicles and services of C&O Family Chess Center, I agree (for myself and child(ren)) to the following:

1. My child(ren) agree to observe and obey all posted rules and warnings and further agree to follow all oral instructions or directions given by Center Instructors and the C&O Family Center employees, representatives, or agents of the C&O Family Chess Center.

2. I recognize that there may be certain inherent risks associated with the program activities and I assume full responsibilities for personal injury to my child(ren) and further release and discharge C&O Family Chess Center and any employee for injury, loss, or damage arising out of my child(ren)'s use of, or presence at, the facilities or outings of C&O Family Chess Center.

3. I agree to indemnify and defend C&O Family Chess Center against all claims, causes of action, damages, judgments, costs, or expenses, including attorney fees and other litigation costs, which may in any way arise from my child(ren)'s use of or presence at outings or at the facilities of C&O Family Chess Center.

4. I agree to pay for all damages to the facilities/property of C&O Family Chess Center and/or facilities/property at afternoon activities caused by my child(ren)'s negligent, reckless, or willful actions.

5. I give my permission for my child(ren) to be transported by private van or car to all outdoor activities.

I have read this document and understand it. I further understand that by signing this release, I voluntarily surrender certain legal rights.

Name of child(ren): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Participants: C&O Family Chess Center  
Address: 217 West Diamond Ave  
Gaithersburg, MD 20877

**Return this form to center.**



## *C&O Family Chess Center*

### **2017 Spring Break Chess Program – Registration Form April 10-14, 2017**

**Student's Name:** \_\_\_\_\_ **D.O.B.:** \_\_\_\_\_

**School & Current Grade:** \_\_\_\_\_

**Parents' (Guardian's) Names:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State & Zip:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Work Phone:** \_\_\_\_\_ **Cell Ph:** \_\_\_\_\_

**Previous Chess Experience (check the one that best describes student):**

**Beginner (Knows the moves)**     **Plays regularly**     **School, Club or USCF player**

**Program Sections:**

- A) Chess & Fun (PM activities)      9 AM – 4 PM      \$285.00 (A or B)**
- B) Pro-Chess (full day chess)      9 AM – 4 PM (instructor approval required)**
  
- C) ½ day AM – (chess only)      9 AM – 12 PM      \$185.00 (C or D)**
- D) ½ day PM – (adv. chess, CITs)    1 PM – 4 PM (instructor approval required)**

**Before/After-Care Requested (additional charge – contact center for rates)**

**Circle Days: M T W Th F (8 AM to 9 AM)**

**Circle Days: M T W Th F (4 PM to 6 PM)**

**Amount Enclosed:** \_\_\_\_\_ **Deposit,** or \_\_\_\_\_ **Full Payment**

Return with \$50 deposit or full payment. Make checks payable to:

**C&O Family Chess Center**

Or, fax to **240-912-7456** or, email to [programs@chesscenter.net](mailto:programs@chesscenter.net) (mail payment).