



# LTRC/COCKEYSVILLE REC CHESS CAMP-Youth SUMMER 2011



## Lutherville Timonium Recreation Council

For boys and girls: **Age 8 (entering 3rd) - Age 14 (entering 9<sup>th</sup>)** For beginning and experienced players

**9 a.m. - 3 p.m., Mon. - Fri. at Cockeysville Middle School, Activity Rooms (Enter from Parking Lot Entrance)**  
**Session 1: July 11 - 15      Session 2: July 18 - 22      Session 3: July 25 - 29**

Make your move and capture some fun this summer with chess! This camp is designed to teach and improve your game of chess with a strong foundation of the game's fundamentals. Instruction includes various checkmates, draws and stalemates, tactics, the end game, and opening development of pieces. Camp instructors include Senior Master William "The Exterminator" Morrison, Arkadiy Frenkel, and Cockeysville Middle School Chess coach, Glenn Segal.

**Registration Donation: \$185 for 1 wk.      \$ 350 for 2 wks.      \$515 for 3 wks.**

**Program Includes:**

Highly qualified instruction for all different levels (beginner, intermediate, and advanced)  
 Strategy/Tactics Sessions      Game Analysis      Daily Games (formal and informal)  
 Adult/Child Tournament      Recreational Activities      .... and more!!

**Every Participant Receives:**

Instruction (group and individual)      Free board, bag and pieces      Pizza Lunch on last day  
 Instructional folder      Daily snacks and drinks      Score book      Tee  
 shirt

\*\*\*Participants will need to bring their own lunches daily.



DEPARTMENT OF  
RECREATION AND PARKS

Mail Pre-Registration form and check by **June 23** to:  
 LTRC Summer Chess Camp  
 Lutherville Timonium Recreation Office  
 121 E. Ridgely Rd., Lutherville MD 21093

**Register early - limited enrollment!**

Low student/instructor ratio. For questions, email [glennsegal@msn.com](mailto:glennsegal@msn.com)

*Baltimore County Department of Recreation and Parks*

*The Baltimore Co. Dept. of Recreation and Parks does not provide background checks on volunteers. Should you require special accommodations (i.e. sign language interpreter, etc.) Please give as much notice as possible by calling the Rec. Office at 410-887-7684 or the Therapeutic Office at 410-887-5370 (voice), or 410-887-5319 (TT/Deaf).*

**Registration Form SUMMER YOUTH CHESS CAMP - 2011**

CHILD NAME \_\_\_\_\_ GRADE (in fall) \_\_\_\_\_ BIRTHDATE \_\_\_\_\_

PHONE (H) \_\_\_\_\_ (CELL/OTHER) \_\_\_\_\_

Email (print neatly) \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

Participant's Name: \_\_\_\_\_ Activity: \_\_\_\_\_

NUMBER OF YEARS EXPERIENCE \_\_\_\_\_ USCF RATING (if applicable) \_\_\_\_\_

Choose Session(s) **1) July 11-15** \_\_\_\_\_ **2) July 18-22** \_\_\_\_\_ **3) July 25-29** \_\_\_\_\_ **Amt. Encl.\$** \_\_\_\_\_

T-Shirt Size: **YMed (10-12)** \_\_\_\_\_ **YLg (14-16)** \_\_\_\_\_ **Adult S** \_\_\_\_\_ **A Med** \_\_\_\_\_ **A Lg** \_\_\_\_\_ **A XLg** \_\_\_\_\_

**ACKNOWLEDGEMENT, WAIVER AND RELEASE OF LIABILITY:**

I HEREBY CONFIRM PARTICIPANT IS IN GOOD HEALTH AND ABLE TO PARTICIPATE IN THE ACTIVITY, I ACKNOWLEDGE THE ACTIVITY MAY INVOLVE RISKS AND DANGER OF BODILY INJURY OR DEATH. I FULLY ACCEPT AND ACKNOWLEDGE THE ACTIVITY MAY INVOLVE RISK AND I HEREBY ASSUME THE RISK AND RESPONSIBILITY FOR ALL DANGERS AND RISKS ASSOCIATED WITH PARTICIPATION IN THE ACTIVITY. I acknowledge Baltimore County, Maryland, the recreation council, and their respective employees, directors, officers, volunteers, members and any other participant, entity, party or person involved in any regard with the activity or the activity premises, and their respective agents, personal representatives, heirs, employees, contractors, successors and assigns (each an "Activity Representative" and collectively the "Activity Representatives"), SHALL NOT BE RESPONSIBLE OR LIABLE IN ANY REGARD OR MANNER FOR ANY AND ALL PROPERTY DAMAGE OR BODILY INJURY (INCLUDING SERIOUS PHYSICAL INJURY OR EVEN DEATH) INCURRED BY PARTICIPANT OR ANY PARTY RELATED THERETO AS A RESULT OF HIS/HER PARTICIPATION IN THE ACTIVITY.

I have read, fully understand and hereby freely sign, approve of, and agree to the terms of the registration form. I HEREBY UNCONDITIONALLY RELEASE, DISCHARGE, COVENANT NOT TO SUE, WAIVE MY RIGHTS AND REMEDIES, AND AGREE TO HOLD HARMLESS THE ACTIVITY REPRESENTATIVE from any and all claims costs, demands, losses, damages, or expenses associated with, in whole or in part, participants involvement with the activity. I certify all answers and information provided on the registration form are to the best of my knowledge true and correct throughout the activity. I shall inform the recreation council, in writing, if any of the information provided in the registration form is incorrect or changes during the course of the activity. I understand Baltimore County and/or the recreation council do not perform criminal and/or background checks on activity representatives. I shall present a government-issued photo identification card including, but not limited to, my driver's license, passport, or United States Visa to the activity representative for review, if requested, at the time I submit this registration form to the recreation council.

Signature Parent/Guardian : \_\_\_\_\_ Date: \_\_\_\_\_

Print Name of Signatory \_\_\_\_\_ Relationship to Participant \_\_\_\_\_