

# Summer Chess Academy for Talented Youth

*Developing Strategies for Our Children's Success*

[www.lichessmates.com](http://www.lichessmates.com)



Cheshire Academy (10 Main St, Cheshire, CT 06410)

July 8 - 12 & July 15 - 19, 2019

Time: 9:00am to 3:30pm

*Head Coach International Grandmaster Gennady Sagalchik*

In our summer program, children are afforded a uniquely-structured opportunity to develop and nurture a love of chess and enhance their learning experience within an inspiring and fun atmosphere. The camp will offer high-level chess training program for children K-12 from Novice through Advanced levels. Each student will be individually evaluated to determine the best fit based on age and level of play. Our students will discover new friendships while balancing the challenge of competitive teamwork with individual effort. In addition, the camp offers daily tennis training under the tutelage of a professional and experienced coaching staff.

- Chess Instruction with Distinguished Coaches
- Instructional Tennis /Recreational Soccer
- Small Groups
- Medical Service

## Sample Daily Schedule:

9:00 - 9:40 – Tactics Training

9:45 - 10:40 – Tennis

10:50 - 11:40 – Lesson

11:45 - 12:10 – Endgame Training

12:15 - 12:55 – Lunch



1:00 - 1:55 – Lesson

2:00 - 2:20 – Soccer

2:30 - 3:25 – Tournament Play

3:30 – Dismissal

Tuition per Session (lunch included): \$645;

Receive **\$150 off** if registered by **3/31**, **\$75 off** by **5/31**, **\$25 off** by **6/31**

\*10% Sibling Discount Available

Registration form: [www.lichessmates.com/day-camp](http://www.lichessmates.com/day-camp)

Additional information: Tel: (516) 225-0600, E-mail: [lichessmates@gmail.com](mailto:lichessmates@gmail.com)



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## Registration Form

(Session I: July 8 - 12, Session II: July 15 - 19, 2019)

Student's Name: \_\_\_\_\_ DOB \_\_\_\_\_

Chess Level \_\_\_\_\_ Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Home Phone # \_\_\_\_\_

Email Address:(please print) \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Father's Name \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Mother's Work # \_\_\_\_\_ Father's Work # \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Tel # \_\_\_\_\_

Registering for: Session I \_\_\_\_\_ Session II \_\_\_\_\_ Both Sessions \_\_\_\_\_

You will be receiving a package with medical forms, emergency forms and waivers prior to start of the program.

### ALL FORMS MUST BE ON FILE PRIOR TO START OF THE PROGRAM

Permission is granted for student to engage in all program activities except as noted on child's health form.

Permission is granted to use any photos in connection with publicity for the Summer Chess Academy for Talented Youth.

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

Tuition per Session (lunch included): \$645;

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Please mail your application & payment payable to *ChessMates* to: *20 Roosevelt Ave., Roslyn, NY 11576*