

THE LITTLE MASTER OF LAHORE
CHESS TOURNAMENT REGISTRATION FORM
Group A (Ages less than 10 Years)

Name of the Institution

Branch/Campus

Address & Telephone No.

Name of Contact Person/Supervisor & Tel #

Name of the participant: _____
Date of Birth (DD-MM-YY): _____
Age as on 25/11/17: _____

Name of the participant: _____
Date of Birth (DD-MM-YY): _____
Age as on 25/11/17: _____

Name of the participant: _____
Date of Birth (DD-MM-YY): _____
Age as on 25/11/17: _____

Name of the participant: _____
Date of Birth (DD-MM-YY): _____
Age as on 25/11/17: _____

Name of the participant: _____
Date of Birth (DD-MM-YY): _____
Age as on 25/11/17: _____

Name of the participant: _____
Date of Birth (DD-MM-YY): _____
Age as on 25/11/17: _____

1. Please attach an attested copy of each participant's birth certificate/B-form and a passport size colour photograph.
2. Each institute is required to pay a registration fee of Rs. 1,000/- per participant. Kindly pay in cash or submit a crossed cheque/a pay order along with this form in favour of 'Management and Educational Services (Pvt.) Ltd.'. Registrations cannot be processed without payment of the registration fee.
3. Last date for registration is 9th Nov. 2017.

THE LITTLE MASTER OF LAHORE
CHESS TOURNAMENT REGISTRATION FORM
Group B (Ages less than 14 Years)

Name of the Institution

Branch/Campus

Address & Telephone No.

Name of Contact Person/Supervisor & Tel #

Name of the participant: _____
Date of Birth (DD-MM-YY): _____
Age as on 25/11/17: _____

Name of the participant: _____
Date of Birth (DD-MM-YY): _____
Age as on 25/11/17: _____

Name of the participant: _____
Date of Birth (DD-MM-YY): _____
Age as on 25/11/17: _____

Name of the participant: _____
Date of Birth (DD-MM-YY): _____
Age as on 25/11/17: _____

Name of the participant: _____
Date of Birth (DD-MM-YY): _____
Age as on 25/11/17: _____

Name of the participant: _____
Date of Birth (DD-MM-YY): _____
Age as on 25/11/17: _____

1. Please attach an attested copy of each participant's birth certificate/B-form and a passport size colour photograph.
2. Each institute is required to pay a registration fee of Rs. 1,000/- per participant. Kindly pay in cash or submit a crossed cheque/a pay order along with this form in favour of 'Management and Educational Services (Pvt.) Ltd.'. Registrations cannot be processed without payment of the registration fee.
3. Last date for registration is 9th Nov. 2017.

THE LITTLE MASTER OF LAHORE
CHESS TOURNAMENT REGISTRATION FORM
Group C (14 Years of Age to Adult)

Name of the Institution

Branch/Campus

Address & Telephone No.

Name of Contact Person/Supervisor & Tel #

Name of the participant: _____
Date of Birth (DD-MM-YY): _____
Age as on 25/11/17: _____

Name of the participant: _____
Date of Birth (DD-MM-YY): _____
Age as on 25/11/17: _____

Name of the participant: _____
Date of Birth (DD-MM-YY): _____
Age as on 25/11/17: _____

Name of the participant: _____
Date of Birth (DD-MM-YY): _____
Age as on 25/11/17: _____

Name of the participant: _____
Date of Birth (DD-MM-YY): _____
Age as on 25/11/17: _____

Name of the participant: _____
Date of Birth (DD-MM-YY): _____
Age as on 25/11/17: _____

1. Please attach an attested copy of each participant's birth certificate/B-form/NIC and a passport size colour photograph.
2. Each institute is required to pay a registration fee of Rs. 1,000/- per participant. Kindly pay in cash or submit a crossed cheque/a pay order along with this form in favour of 'Management and Educational Services (Pvt.) Ltd.'. Registrations cannot be processed without payment of the registration fee.
3. Last date for registration is 9th Nov. 2017.