



# INTERNATIONAL CONFERENCE CHESS IN SCHOOLS

Yerevan, Armenia  
16-18 October, 2014

## Registration Form

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Organization/Institution: \_\_\_\_\_

Position/Title: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Region: \_\_\_\_\_

Postcode: \_\_\_\_\_ Country: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Title of the Article: \_\_\_\_\_

\_\_\_\_\_

Registration date: \_\_\_\_\_

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

Send completed application to:

E-mail: [csa@chessacademy.am](mailto:csa@chessacademy.am)