

Academic Challenge Bowl/MS Chess — 2021-2022 — Confirmation/Registration Form  
[NOTE: **THIS IS NOT A BILL**; invoices will be generated separately once discounts are processed.]

Check all appropriate boxes below:

- Yes, our school wishes to participate in the 2021-2022 Academic Challenge Bowl program. We understand the cost to be \$483/middle school.
- Yes, our school wishes to participate in the 2021-2022 Interscholastic Chess League.  
Check one following:
- Yes, our school wishes to participate in the 2021-2022 Interscholastic Chess League in a middle school league. We understand the cost to be \$198/middle school.
- Yes, our school wishes to participate in the 2021-2022 Interscholastic Chess League in a high school league. We understand the cost to be \$333/middle school.
- Yes, our school wishes to sign up for an in-season tutorial session. The cost will be \$88.
- Yes, our school wishes to sign up for the pre-playoff practice scrimmage to be held in the weeks prior to Interscholastic League playoffs. The cost is \$15/player or \$55/team.
- We are unsure about our participation and would like to get more information.  
[Return ASAP if checked] Information request:  Both  Chess  ACB

Middle School \_\_\_\_\_

ACB Coach #1(if known)\_\_\_\_\_ School Phone(\_\_\_\_)\_\_\_\_\_

ACB Coach #2(if known)\_\_\_\_\_ School Phone(\_\_\_\_)\_\_\_\_\_

Chess Coach (if known)\_\_\_\_\_ School Phone(\_\_\_\_)\_\_\_\_\_

Contact Person:\_\_\_\_\_ School Phone(\_\_\_\_)\_\_\_\_\_

Did your school play ACB last year? Yes \_\_\_\_\_ No \_\_\_\_\_

Did your school play chess last year? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, in a MS or HS league  
(circle one)

We wish to be billed immediately and take the 'early pay' discount. Yes \_\_\_\_\_ No \_\_\_\_\_

\_\_\_\_\_  
Signature of principal

Please mail or fax to:  
CYPRAS, Inc.  
221 Norris Dr., Suite 2  
Rochester, NY 14610  
(585)-473-0864 Fax (585)-563-6745

Contact for invoicing: \_\_\_\_\_

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

Scanned forms may also be submitted as a pdf file. E-mail the completed form to: nyacb1@gmail.com

**REQUESTED RETURN DEADLINE: Friday, October 15, 2021**

**NOTE: THIS IS NOT A BILL. The invoice for the participation fee(s) will be mailed separately.**