

CHESS ASSOCIATION KERALA

(Reg.No.S.333/05)

ARBITER REGISTRATION FORM FOR THE YEAR - 20_____

ſ	РНОТО

		(To be filled in Block Letters)	
1.	Name Mr. / Ms.	:DOB :	
2.	Father / Husband Name	:	
3.	Address for communication	:	
4.	Telephone with STD Code	: Cell No :	
5.	Email ID	: Languages known:	
7	Name of the District to which the Arbiter belongs	:	
8	FIDE Rating	:FIDE ID No :	
9	Titles if any	:IA / FA / Sr NA	
10	Was any disciplinary action taken	against you? If yes, furnish details:	
1.		age S/o / D/o declare e true to the best of my knowledge and belief.	
2.	I also declare that I shall abide by the rules and regulations and the latest amendments and decisions of the Distriction / State Chess Association / Federation as the case may be and cooperate with the officials in participating in State and National Tournaments / Championships. I also declare that I will not officiate/Organize any un-authorize tournament / championship		
Place	:		
Date	:	Arbiters' Signature	
	Recon	nmendation from District Chess Association	
Mr. / N	Ms	belongs to our state and his / her knowledge and performance	
as Arb	iter is	Please tick the appropriate	
Excell	ent Very Good	Good Moderate	

Signature of the District Secretary with seal

Note: Application to be submitted along with a fee of Rs.300/- for Renewal (Rs.500/- for New Registration). All Payments should be paid by Demand Draft favoring **Chess Association Kerala, Kottayam.** For Migration from one District Association to another, the No Objection Certificate of the former District Association has to be obtained before getting registered with the new Association.