4th Norfolk Blitz Tournament Monday 27<sup>th</sup> May 2024 Starting at 10.30 am

Horstead Tithe Barn, Rectory Road, Horstead, NR12 7EP

Rounds 1-4 10.30 - 12.10

Lunch Break 12.10 - 13.10

Rounds 5-7 13.10 - 14.25

Rounds 8-10 14.35 - 15.50

Play Off (if required) 16:00

Rate of Play: 5 minutes plus 2 seconds per move

Entry Fee £15(adults) £10 (Juniors)

## **LIMITED TO 44 ENTRANTS**

Closing date for entries 7pm Saturday 25<sup>th</sup> May 2024

ECF Blitz or ECF Rapidplay ratings used or, if neither, ECF Standard play ratings. Unrated players will be allocated a rating but will be ineligible for any rating prize. Games will be submitted for rating data.

ECF Membership is not required.

Prizes will be dependent on entries. First, Second and rating prizes if sufficient entries.

## FIDE Laws of Chess (Appendix B) apply. The Controller's decision is final in all matters

**Controller:** John Wickham (FIDE Arbiter)

**Tournament type** Dependent on entries but likely a Swiss if sufficient entries.

There will be two sections, Championship and Challengers, subject to sufficient entries

**Refreshments-** Tea, Coffee and biscuits will be available.

There are places to purchase food nearby, but you may wish to bring your own lunch.

## Payment:

Please pay by bank transfer using Account No. 44416568 and Sort Code 30-90-90. Account name: Norfolk County Chess Association.

If using this method, then quote your name in the comments and email John Wickham (<u>j.r.wickham@btinternet.com</u>) to confirm payment has been made.

If unable to pay by bank transfer, then send a cheque payable to Norfolk County Chess Association to John Wickham at the address above.

## **On Line entry Form:**

https://forms.gle/uhE8oqCtkg9jzZR9A

**Entry Form** Please complete in Block Capitals and email the details or send to John Wickham, 55 Shakespeare Way, Taverham, Norwich, NR8 6SL or send the details by email: j.r.wickham@btinternet.com Tel: 07808 876785

Full Name: .....

ECF Rating No: .....

Blitz/Rapidplay Rating.....

If none then Normal Play Rating: .....

Date of Birth (Juniors only) .....

Address:

Post Code:

Email:

Bye Required in Round 1-Yes No (Ring as appropriate)

Tel No:

Entry Fee paid£.....Donation (Gratefully Received)£.....Total£....