

**OHIO CHESS ASSOCIATION
MEMBERSHIP FORM**

Name _____

Address _____

City _____ State _____ Zip _____

Email _____

USCF ID _____

☐ Adult \$ 20

☐ Junior \$ 15

☐ Family \$ 5 (second member at same address)

☐ Affiliate \$ 15

☐ New ☐ Renewal Number of years? _____

Mail completed form with check to:

Ohio Chess Association
% Cheryl Stagg
7578 Chancery Dr.
Dublin, OH 43016