



Wizards of the Mind  
 379 Morris Avenue  
 Springfield, NJ 07081  
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 973-262-1395

## WIZARDS OF THE MIND Winter 2025 CHESS SCHOLASTIC CHAMPIONSHIP

Details and Registration on [www.wizardsofthemind.com/chesstournaments](http://www.wizardsofthemind.com/chesstournaments)

**Tournament Date: Sunday, March 9, 2025**  
**Place: 379 Morris Avenue, Springfield, NJ 07081**

**Rated Tournament:**

4 Rounds (Win or Lose), Game/25min; 5 second delay - Trophies to top 5, awards and medals to participants with 2.5 or more points in each section

**Super-Stars Section U1600** – Players rated under 1600. Registration: 9:00am-9:20am. Rounds start at **9:30am**. Recommended for L7. Tournament Prep and L8. Advanced students.

**All-Stars Section (U700)** - Players rated under 700. Registration: 9:00am-9:20am. Rounds start at **9:30am**. Recommended for L4. Challenger, L5. Challenger Plus, L6. Intermediate students.

**Rising-Stars Section (U400)** - Players rated under 400 and unrated players who are looking to get rated. Registration: 2:00pm-2:20pm. Rounds start at **2:30pm**. Recommended for Novice students.

**Unrated Tournament: Beginner players welcome! No USCF membership required.**

4 rounds (Win or Lose), Game/25min; 5 second delay - trophies to top 5, medals to all participants. Registration: 2:00pm-2:20pm. Rounds start at **2:30pm**. Recommended for Novice students.

**Entry Fee:** \$35 (mailed by 3/2/25), \$40 from 3/3/25-3/8/24; \$50 on-site. Checks payable to “Wizards of the Mind” Mail registration form and entry fee to the Wizards of the Mind, 379 Morris Avenue, Springfield, NJ 07081.

**Mail entries:** 379 Morris Avenue, Springfield, NJ 07081

**Special Info:** For rated players: USCF membership will be required to participate in the rated sections.

**Questions about our tournaments?:** Please text @CoachRobert on Telegram Messenger or email [info@wizardsofthemind.com](mailto:info@wizardsofthemind.com).

**Tournament Date: March 9, 2025**

### TOURNAMENT REGISTRATION FORM

<b>Participant's Full Name:</b>	
<b>USCF ID*:</b>	
<b>USCF Expiration Date*:</b>	
<b>Rating*:</b>	
<b>Age and DOB:</b>	
<b>Grade:</b>	
<b>Address:</b>	
<b>E-mail:</b>	
<b>Phone:</b>	
<b>Section (please circle one):</b>	<input type="checkbox"/> U1600 <input type="checkbox"/> U700 <input type="checkbox"/> U400 <input type="checkbox"/> Unrated

\*Not required if registering for unrated section