



# SARA BANGLA DABA SANGSTHA

## BID FORM

(Bid form for State Chess Championships/ FIDE Rated/ Non-Rated Chess Tournament)

- Name of the Event : \_\_\_\_\_
- Organiser's name and address : \_\_\_\_\_
- Mobile No. : \_\_\_\_\_
- Email address : \_\_\_\_\_
- Expected no of participants : \_\_\_\_\_
- Tournament is :  Open  or only for Female players  for Age Group players
- Starting date & time : \_\_\_\_\_
- Closing date & time : \_\_\_\_\_
- No of rounds to be conducted : \_\_\_\_\_
- Whether FIDE Rated :  Yes  No
- Time Control / Time Limit : \_\_\_\_\_
- Address of the tournament venue : \_\_\_\_\_
- Availability of public transport near venue : \_\_\_\_\_
- Precise place where lodging is provided, if lodging is provided & distance between the lodging and the venue : \_\_\_\_\_
- Are the tournament hall and lodging places well ventilated and illuminated :  Yes  No
- Total cash prize offered : \_\_\_\_\_
- Maximum Entry fee charged : \_\_\_\_\_
- Is space with sitting arrangement available for accompanying persons :  Yes  No
- Whether toilets are available for the participants/ accompanying persons (Gents & Ladies separate) :  Yes  No
- Name of the proposed Chief Arbiter : \_\_\_\_\_
- Number of arbiters : \_\_\_\_\_
- Whether Chess Clocks will be provided to all the Boards :  Yes  No
- Number of officials/ Volunteers to assist the tournament : \_\_\_\_\_



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We enclose Bank Transfer Ref./ DD/ Cheque No. \_\_\_\_\_ for Rs. \_\_\_\_\_ favouring Sara Bangla Daba Sangstha as Tournament Recognition Fee. We understand that this amount will be forfeited in the case of cancellation of the Tournament by the organiser.

### Declaration

"I/We guarantee that we will ensure SBDS and AICF registration (for FIDE Rated event) for all the participants. We also undertake to abide by the rules of AICF, SBDS and our District Chess Association.

" "We understand that if any State Championship, FIDE Rated event, National or International event coincides with the date of our tournament, our tournament will be postponed."

"We hereby agree to follow the instructions of our District & State body in respect of our proposed tournament."

Place:

Date:

organizer's Signature

### **For District Association Recommendation**

We have verified the details given above and recommend for SBDS approval.

Name and Signature of District Chess Association Secretary/ President

Under whose jurisdiction this event is held

Place:

Date:

Seal of the District chess Association

N.B.

✓ Please Tick (Where applicable)