



Chess Camps

beginners and improvers
Our 6th year

**Aras Phadraig, Lewis St, Killarney,
July, 20-24**

**Crescent College, Dooradoyle, Limerick
July, 27-31**

**St Mary's College, St Marys Rd, Galway
Aug 10-14**

**Ursuline College, Blackrock, Cork
Aug 17-21
10am – 1pm daily**

**Chess medals will be awarded to all
those who complete the week**

Only €49.99
Ages: 7 - 18

www.ChessZ.com

Tel: 061-395-374, 087-679-4211

John Alfred, has extensive chess coaching experience in Ireland and Australia, and has part-trained many Irish Junior Team members. Last year he taught chess in 25 schools. He is a former Connacht Champion and North Munster Champion, and will manage the training.

Beginners will be introduced to the rules and get plenty of game practice. There will be a strong emphasis on checkmating. Some 'improver material' will also be covered.

Improvers will cover

Openings: Opening principles, Scholars Mate, Giuoco Piano, Two Knights Defence, Fried Liver Attack, Ruy Lopez, Petroff's Defence, Centre game, Gambits, Sicilian Defence, etc.

Middle Game: Open files, 7th Rank, 8th Rank, Pawn-chains, Passed and Isolated pawns, etc.

Endgame: King & Pawn. Queen, Rook and two Bishop mates. Rook & Pawn, Queen, Bishop and Knight endgames.

Tactics: Pins, Skewers, Forks, etc

Prize giving: Friday at 12.30pm approx. All are welcome to attend.

DVDs: will form part of the training

Snacks: Children should bring their own 'healthy' snacks.

Please post your booking to:

John Alfred, Chess Camps, Kerry Rd,
Adare, Co. Limerick

Please Note: Some details may change slightly. Please check the website for any changes

Bookings need to be in very very soon.

**If you would like a chess camp near you,
please contact us.**

ChessZ Camp Booking Form 2009

Select a venue.....please tick one.....

Killarney___ Limerick___
Galway___ Cork___

Name: _____

Address: _____

Telephone (home) _____

Telephone (during camp-time) _____

e-mail address (for receipts, chess news) _____

Any medical or learning problems? _____

Age: _____ Date of Birth _____

School: _____

Have you an ICU rating? Yes ___ No ___

Playing how long? _____

Parents name (s)– printed _____

Parents signature _____

Please enclose 20 Euro deposit to secure your place. Full refunds can be given up to the Saturday before the start date.

Minimum viable camp size is 15.

Doc date: 3-June-09