

TOURNAMENT REPORT FORM

IT3

Federation UAE		Name of Tournament Sharjah Capital Of Islamic Culture Chess Championships Women							
Country and Place of Tournament						Starting date 2014/11/15		Ending date 2014/11/23	
Organizer of the Tournament Sharjah Chess Club									
Contact Information (Address, phone, fax, E-mail) of the person responsible for information: _____ _____ _____									
Number of Rounds 9		Schedule (number of rounds/day)				Rate(s) of play 90M + 30S Per Move			
Tournament Type Swiss System			Pairing System of a Swiss System Tournaments FIDE Manual <input type="radio"/> Person responsible Computerized <input checked="" type="radio"/> Program used Swiss-Manager						
Special Remarks (exception in pairing, restart option,) _____ _____ _____ _____									
Type	Number	Number of Feds	Host Fed. players	Other Fed. players	Type	Number	Number of Feds	Host Fed. players	Other Fed. players
Rated	23	18	4	19	Unrated	3	3	0	3
GM	0	0	0	0	WGM	2	2	0	2
IM	0	0	0	0	WIM	7	5	2	5
FM	0	0	0	0	WFM	6	5	1	5
Chief Arbiter and contact information for Chief Arbiter (Address, phone, fax, E-mail): Al Taher, Sultan Ali IA ID: 9301712 _____ _____									
1 st Deputy Chief Arbiter IA Hiba									
If more than 50 players									
2 nd Deputy Chief Arbiter Al-Ali . ID: (9305670)									
If more than 100 players									
3 rd Deputy Chief Arbiter									
If more than 150 players									
4 th Deputy Chief Arbiter									



The organizer must provide this report form to each arbiter who has achieved a norm, his/her federation, the organizing federation and the FIDE Secretariat