



TECH JUDO

INTER CLUB JUDO TOURNAMENT

USA JUDO SANCTION

We would like to invite you to participate on our inter club judo tournament. These inter club tournaments are designed to help junior and senior novice judo students gain valuable competition experience, and allow instructors to evaluate student progress in a moderately competitive atmosphere.

All contestants will be matched as evenly as possible by age, belt and weight. All contestants will receive an award. Each contestant will be given a minimum of 2 matches

Date: Saturday, February 17, 2018

Time: Check-in: Juniors: 8:30 am-9:30 am, Seniors 11:30 am
Tournament matches starts: 10:00 am

Location: HCST Recreation Center
2126 85th Street, North Bergen, NJ 07047

Eligibility: Junior Boys and Girls 4- 16yrs

New: Sr. Novice Men <132,<145,<161,<178,<198,<220, +220
Sr. Novice Female Light, Middle, Heavy

Must present a current USJF, USA Judo, or USJA card.

Rules: Current IJF rules with the following modifications: 6mx6m
competition area with a 4m safety area. No chokes for 12
and under. No arm bars in any divisions

Fees: 30.00 entry fee if pre-registered. 40.00 day of
tournament

Make check payable to HCST and mail to:

Tech Judo c/o HCST

2100 85th Street, North Bergen, NJ 07047

PLEASE FILL IN ALL INFORMATION ON ENTRY FORM. SIGN WAIVER
ON THE BACK, AND MAIL TO THE ADDRESS BELOW.

Tournament Directors: Clyde Worthen/Leonardo Victoria

Contact Info: Phone: (201) 328-4055 Email: clydeapajudo@aol.com

INTER CLUB ENTRY FORM

USA JUDO SANCTION

Name _____ Age _____ Belt _____
Address _____ Weight _____ Male _____ Female _____
City _____ State _____ Zip _____
Email _____
Judo Club _____ Instructor _____
USJF _____ USA Judo _____ USJA _____

Expiration date _____

NOTE: All contestants must have a current membership card.
Applications will be available at the tournament.

Entry fee: 30.00 pre-registered
40:00 day of tournament

Mail to: Tech Judo c/o HCST
2100 85th Street
North Bergen, NJ

**If assistance accommodation is needed circle category:
VISION LOSS/BLINDNESS HEARING LOSS/DEAFNESS
TYPE OF ASSISTANCE NEEDED OR NAME OF PERSON
ASSISTING: _____**

PLEASE SIGN WAIVER ON OTHER SIDE.

WARNING!
WAIVER AND RELEASE OF LIABILITY AND AGREEMENT TO PARTICIPATE

In consideration of being permitted to participate in any way, including travel to and from, in any Judo tournament, practice, clinic, and related events and activities ("Activity") of the **United States Judo Federation, Inc., USA Judo/United States Judo, Inc., United States Judo Association, Inc., Hudson Judo Yudanshakai, Inc., Hudson County Schools of Technology, and Tech Judo.** I agree:

1. I understand the nature of Judo activities and believe I am qualified to participate in such Activity. I also understand the rules governing the sport of Judo.
2. I further acknowledge that prior to participating, I will inspect the mats, equipment, facilities, competition pools or divisions, and the elimination or scoring system to be used, and if I believe anything is unsafe or beyond my capability, I will immediately advise my coach, supervisor, and/or a tournament official of such conditions and refuse to participate.
3. I acknowledge and fully understand that I will be engaging in a contact sport that might result in serious injury, illness or disease, including permanent disability or death, and severe social and economic losses due not only to my own actions, inactions or negligence, but also to the actions, inactions, or negligence of others, the rules of the sport of Judo, or conditions of the premises or of any equipment used. Further, I acknowledge that there may be other risks not known to me or not reasonably foreseeable at this time.
4. Knowing the risks involved in the sport of Judo, I assume all such risks and accept personal responsibility for the damages following such injury, illness, disease, permanent disability, or death.
5. I hereby release, waive, discharge and covenant not to sue the **United States Judo Federation, Inc., USA Judo/United States Judo, Inc., United States Judo Association, Inc., Hudson Judo Yudanshakai, Inc., Hudson County Schools of Technology, and Tech Judo,** together with their affiliated clubs, their respective administrators, directors, officers, agents, coaches, and other employees or volunteers of the organization, event officials, medical personnel, other participants, their parents, legal guardians, supervisors and coaches, sponsoring agencies, sponsors, advertisers, and if applicable, owners, lessors, and lessees of premises used in conducting the event, all of whom are hereinafter referred to as "Releasees", from any and all litigation expenses, attorney fees, loss, liability, damage or costs on account of injury, illness, disease, including permanent disability and death or damage to property, caused or alleged to be caused in whole or in part by the negligent acts or omissions of the Releasees or otherwise to the fullest extent permitted by law.

I HAVE READ THE ABOVE WARNING, WAIVER, AND RELEASE, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND KNOWING THIS, SIGN IT VOLUNTARILY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE. I AGREE TO PARTICIPATE KNOWING THE RISKS AND CONDITIONS INVOLVED AND DO SO ENTIRELY OF MY OWN FREE WILL. I AFFIRM THAT I AM AT LEAST 18 YEARS OF AGE, OR, IF I AM UNDER 18 YEARS OF AGE, I HAVE OBTAINED THE REQUIRED CONSENT OF MY PARENT/LEGAL GUARDIAN AS EVIDENCED BY THEIR SIGNATURE BELOW. I INTEND THIS TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THAT THE BALANCE, NOTWITHSTANDING SHALL CONTINUE IN FULL FORCE AND EFFECT.

Participant

Participant's Signature

Date

**FOR PARENTS/LEGAL GUARDIANS OF PARTICIPANTS OF MINORITY AGE
(UNDER AGE 18 AT TIME OF REGISTRATION)**

This is to certify that I, as parent/legal guardian with legal responsibility for this participant, do consent and agree to his/her release, as provided above, of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liabilities incident to my minor child's involvement or participation including litigation expenses, attorney fees, loss, liability, damage or costs which may incur as the result of the minor child's participation in these programs as provided above, even if arising from their negligence, to the fullest extent permitted by law. I have instructed the minor participant as to the above warnings and conditions and their ramifications.

Parent/Legal Guardian

Parent/Legal Guardian's Signature

Date

Certificate Regarding Non-Black Belt Contestants

I _____ a Judo instructor, who has been
(print name of Instructor)
awarded the Judo rank of Shodan or higher, under the auspices of the USJI, USJF,
USJA or Judo Canada, hereby certify that, _____
(print name of contestant)
although not having been awarded the Judo rank of Shodan or higher, is of sufficient
aptitude and skill in Judo to compete in this competition.

Judo Instructor (print) _____

Signature of Instructor _____ Date _____

Rank _____

Organization rank obtained through _____