

**2009 High School National Judo Championships
in Hawaii, a Grassroots Judo© Event**

ATHLETE ENTRY REQUIREMENTS CHECKLIST(revised)

To assure that the requirements for participation in the Championships have been fulfilled, the following forms must be completed and received by **August 12, 2009** and sent to the address printed at the bottom of this page. **Late/ Walk-in entries will only be accepted on Friday, August 14 , at the Tournament Site from 4:00 pm – 7:pm.**

- **Official Entry form and \$40.00 entry fee. No additional late or walk-in charges *(new)***
- **Copy of current USJF, USJA, USA Judo, Kodokan, or IJF recognized National card.** If you do not have a card, please write on the entry form "Will purchase at Event". **Note that U.S. citizenship is NOT required.**
- **Warning, Waiver, Release of Liability and Agreement to Participate**
- **Certificate of Age** – Athletes must be born in 1990 or later.
- **Proof of Age:** Copy of Government issued birth certificate, military identification, passport, or USA Judo membership card having the verification symbol"(V)" printed following the birth date. **A driver's license is not proof of age!**
- **Power of Attorney:** Required for participants under the age of 18 years whose parent/guardian will not be attending the Championships.
- **Proof of Black Belt Rank:** Copy of rank certificate **OR** Certificate Regarding Non-Black Belt Contestants
- **Medical Release Form**
- **Academic (or Home School) and Full time Certification form:** Make sure that proper officials sign i

No photo needed

Forward all forms and fees to: 2009 High School National Judo Championships
c/o Ray Imada, 44-011 Malukai Place, Kaneohe, Hawaii 96744

Note: Don't forget to include your **non-refundable** check, money order, or cashier's check made payable to: 2009 High School National Judo Championship

2009 High School National Judo Championships
in Hawaii, a Grassroots Judo© Event
USJF Sanctioned Event #09-08-02
OFFICIAL ENTRY FORM

Participant's Name:

Last Name (Family name, Surname)

First Name

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Street Address:

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City

State

Zip Code

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Telephone:

Date of Birth: (mm-dd-yyyy)

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Grade in School

Judo Rank:

Judo Club Name:

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Membership Number: (USJF, USJA, USA Judo, or IJF) circle one

Membership Expiration Date: (mm-dd-yyyy)

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School Name:

T-shirt size: (circle one)

	S	M	L	XL	2X	3X
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E-Mail Address:

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Circle the category in which you intend to complete. This is for planning purposes only. Your actual category will be determined by your actual weight at the official weigh-in. All weights in Kilograms (kg)

Female	44	47	49	52	55	59	63	70	78	78+
Male	49	52	55	60	66	73	81	90	100	100+

Select Division: (check one)

Regular Competition: Full IJF rules (chokes and armlocks allowed)

Novice Competition: No chokes or armlocks allowed /No ikkyus or blackbelts

In the event that I am uncontested in my weight category, I choose one of the following options: (check one)

Remain uncontested only

Retain 1st place, and compete in an exhibition match (if available)

Contestant and Parent/Legal Guardian (if contestant is under 18 years old), must sign below:

Participant's Signature	Date	Parent/Legal Guardian's Signature	Date

ACTUAL WEIGHT _____ OFFICIAL INITIAL _____

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CERTIFICATE OF AGE

I certify that I am _____ years of age as of the date of competition. Note: For this event, athletes must be born in 1990 or later. A copy of my Government issued birth certificate, passport, military identification or USA Judo card with the verification symbol "(V)" printed following my date of birth MUST BE INCLUDED WITH ENTRY FORM.

Contestant and Parent /Legal Guardian (if contestant is under 18 years old), must sign below:

Participant's Signature

Date

Parent / Legal Guardian's Signature

Date

POWER OF ATTORNEY

If contestant is under the age of 18 years, this document must be completed by the contestants parent or legal guardian is not attending the Championships. I certify that I am the parent or legal guardian of _____ a minor. I will not be in attendance at the Championships and hereby designate _____, who is over 21 years of age, to be my true and lawful attorney, to act in my name, place, and stead, to do any and every act and exercise any power that I might or could do or exercise through any other person and that he/she shall deem proper and advisable, intending hereby to vest in the person acting for me full power and authority to do and perform all and every act and thing.

X _____
Signature of parent or legal guardian

CERTIFICATE REGARDING NON-BLACK BELT CONTESTANTS

I, _____, a Judo Instructor, who has been awarded the Judo rank of Shodan or higher, recognized by the USJF, USJA, USA Judo, Kodokan, or an IJF recognized National organization, hereby certify that _____ although not having been awarded the Judo rank of Shodan or higher, is of sufficient aptitude and skill in Judo to compete in these Championships. **A copy of my proof of rank (rank certificate, or rank card issued by the appropriate National Offices) is attached.**

X _____
Signature of Judo Instructor

MEDICAL RELEASE FORM

This is to certify that _____ has been examined by me and has
(Contestant's Name)

been cleared to compete in the 2009 High School National Judo Championships in Hawaii, a Grassroots Judo© Event. He/she has no injuries, medical conditions, or physical limitations that could keep him/her from competing.

Physician's Name (Printed): _____ Physician's Signature:

Date: _____

ACADEMIC AND FULL TIME STUDENT CERTIFICATION

This is to certify that _____ is a full time student in good standing at

_____ in the _____ grade.
(Name of School) (9,10,11,12 or 2009 graduate)

Signature of Registrar, Principal, or Athletic Director: _____

HOME SCHOOL AND FULL TIME STUDENT CERTIFICATION

This is to certify that _____ is a full time student in good standing in the _____ grade.

(9,10,11,12, or 2009 graduate)

Signature of Home School Instructor: _____

ATHLETE CONDUCT

- A) Hotel /lodging premises: ALL participants must observe proper dress codes and house rules as deemed by hotel/lodging management.
- B) Tournament site:
 - 1) All participants are required to abstain from possessing or consuming alcoholic beverages, tobacco or harmful drugs.
 - 2) Respect for the BYU-Hawaii premises and the property of others.
 - 3) No involvement with gambling, indecent materials, disorderly, obscene, or indecent conduct or expression, or disruption of the peace in and around the facilities.
 - 4) Proper dress in/around facilities. Except for necessary medical treatment, NO shirtless/topless appearance

Any inappropriate behavior during the days of the Tournament activities will be dealt with immediately, and at the discretion of the Tournament Director, may result in expulsion from the sites, from the competition, and being financially responsible for any damages to property.

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**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 the **2009 High School National Judo Championships in Hawaii, a Grassroot Judo© Event**, in any Judo tournament, practice, clinic, and related events and activities of the **United States Judo Federation, Inc., United States Judo, Inc., United States Judo Association, Inc., 50th State Judo Association, Inc., Brigham Young University-Hawaii, Kahuku High School, and the Ohana Hotels**, I hereby:

1. Acknowledge that I am familiar with the sport of Judo and understand the rules governing the sport of Judo.
2. Agree 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. Acknowledge and fully understand that I will be engaging in a contact sport that might result in serious injury, 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, permanent disability, or death.
5. Release, waive, discharge and covenant not to sue the **United States Judo Federation, Inc., United States Judo, Inc., United States Judo Association, Inc., 50th State Judo Association, Inc., Brigham Young University-Hawaii, Kahuku High School, and the Ohana Hotels**, together with their affiliated clubs, their respective administrators, directors, agents, coaches, and other employees or volunteers of the organization, event officials, medical personnel, other participants, their parents, 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 claims, demands, losses, or damages on account of injury, including permanent disability and death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the Releasees or otherwise to the fullest extent permitted by law.

I HAVE READ THE ABOVE WARNING, WAIVER, AND RELEASE, UNDERSTAND THAT I GIVE UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND KNOWING THIS, SIGN IT VOLUNTARILY. 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.

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/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 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

WEIGH-IN SITES AND TIMES

*Participants can only enter one division

Monday, August 10, 2009

Hodokan Judo Club	6:00 pm to 7:00 pm
Kapolei Judo Club	6:00 pm to 7:00 pm
Leeward Judo Club	6:00 pm to 7:00 pm
Makiki Seidokan	6:00 pm to 7:00 pm
Pearl City Hongwanji	6:00 pm to 7:00 pm
Salt Lake Judo Club	6:00 pm to 7:00 pm
Shobukan Judo Club	6:00 pm to 7:00 pm

Tuesday, August 12, 2009

Aiea Hongwanji	6:00 pm to 7:30 pm
Mililani Hongwanji	5:30 pm to 7:30 pm
Kamehameha Judo Club	6:00 pm to 7:00 pm
Wadokan Judo Club	5:30 pm to 7:00 pm
Puna Hongwanji	6:30 pm to 8:00 pm
Kona Hongwanji	6:30 pm to 8:00 pm

*All Weigh in sites must email contestant list to Dean Shiraki- dkshiraki@aol.com
By Wednesday, August 13, 2009

**LATE/ WALK-INS MUST REGISTER/WEIGH-IN AT TOURNAMENT SITE
FRIDAY, AUGUST 14, 2009 FROM 4:00PM TO 7:00PM
Please call Ray Imada – (808) 330-5413 to arrange**