

20th Annual Sam Fujiyama Memorial Judo Tournament

DATE/TIME: Sunday, January 15, 2012, 8:30 a.m.
PLACE: Salt Lake District Park Gym, 1159 Ala Liliwai Place, Honolulu, HI, 96818
HOST: Makiki Seidokan
WEIGH-IN: See attached sheet - Weigh in sites and times
SANCTION #: **12-01-13**

ENTRY: Each contestant/parent(s) must complete the "Waiver and Release of Liability and Agreement to Participate" form and the "Accident Waiver and Official Entry Form" (for each division entered). Must be a member of the U.S. Judo Federation (USJF), U.S. Judo Association (USJA), or U.S. Judo, Inc. (USJI). Waivers and USJF, USJA, or USJI card must be presented at weigh-in. There will be **NO Early or Late Requests** to play, **NO Sunday Weigh-in** and the Texas Matching System will be used. Contestants can only enter one division.

FEES: 50th State Judo Association member \$20.00 per contestant, per division entered.
Non-member \$25.00 per contestant, per division entered.
All entry fees are non-refundable and payable at weigh-in. Make checks payable to: **50th State Judo Association**
Email consolidated entry list to: dkshiraki@aol.com. Any questions, call Dean Shiraki [H] 626-1626.

ELIMINATION METHOD:

Current IJF contest rules will be used with the following modifications:: Modified double elimination will be used in division with four or more competitors. If only two people are matched in a division, then it will be full double elimination. All matches will be 3 minutes except the Novice division, 10 years and younger (2 minutes). "White gis are mandatory and blue gis are optional. Contestant are responsible to bring their own blue and white belt for competition". See attached weight division.

Techniques not allowed by age:

SHIME WAZA

INTERMEDIATE 2 AND YOUNGER

KANSETSU WAZA

JUVENILE B AND YOUNGER

Kanebasami is not allowed for all ages. If any person moves up in age division, the older age division rules apply.

NOVICE DIVISION: (White belts with less than six months experience)

Contestants will be grouped based on the following order: 1) Age/Weight 2) Sex 3) Rank and 4) Instructor's recommendation.

10 years and younger

Newaza (mat work) only

11 years and older

Tachiwaza

AWARDS: Novice to Bantam divisions will receive trophies for first (3) places in all divisions
Intermediate and higher divisions will receive medal

ANNUAL PICTURE TAKING: *Please have your judo gi on by 9:00 am*, the photographer will be taking pictures promptly at 9:00 am. **Referees:** please have your coats on during the photo shoot. – Mahalo for your participation.

**YOUR HELP IS NEEDED AT 7:00 A.M. TO SET UP MATS &
CLEAN UP AT THE END OF THE TOURNAMENT FROM
LEEWARD, PEARL CITY HONGWANJI AND SHOBUKAN JUDO CLUB**

REFEREES, JUDGES, TIMERS AND SCOREKEEPERS ARE ALSO NEEDED TO MAKE THIS TOURNAMENT A SUCCESS.

TIMERS AND SCOREKEEPERS FROM:

LEEWARD, PEARL CITY HONGWANJI AND SHOBUKAN JUDO CLUB Breakfast, lunch and refreshments will be served by Makiki Seidokan Judo Club

COMPETITION CATEGORIES

(2012)

Please note that each Category is based solely on the year in which the contestant was born. The contestant's actual age on the day of competition is irrelevant. For each weight division, the weight range will be over the previous weight and up to and including the weight listed.

If a contestant has no one else in the division he/she weight in for, the contestant may be move one weight category same age or one age category same weight. Any changes will be discussed with the coaches and/or the competitors involved prior to the actual change.

The Tournament Director reserves the right to make changes when it is in the best interest of the contestants to make these changes due to differences in weights. Any changes will be discussed with the coaches and/or the competitors involved prior to the actual change.

MALE

CATEGORY	YEAR BORN	DIVISION IN POUNDS								
BANTAM 1	2006 – 2007	42	51	62	+62					
BANTAM 2	2004 – 2005	51	59	68	77	+77				
INTERMEDIATE 1	2002 – 2003	57	66	75	84	95	+95			
INTERMEDIATE 2	2000 – 2001	62	68	75	84	92	106	117	+117	
JUVENILE A	1998 – 1999	79	88	97	106	117	128	141	+141	
JUVENILE B	1996 – 1997	112	121	132	145	161	178	198	+198	
JUVENILE C	1993 – 1995	121	132	145	161	178	198	220	+220	
SENIOR	Various	121	132	145	161	178	198	220	+220	
MASTERS	Various	121	132	145	161	178	198	220	+220	

FEMALE

CATEGORY	YEAR BORN	DIVISION IN POUNDS								
BANTAM 1	2006 – 2007	42	51	62	+62					
BANTAM 2	2004 – 2005	51	59	68	77	+77				
INTERMEDIATE 1	2002 – 2003	57	66	75	84	95	+95			
INTERMEDIATE 2	2000 – 2001	62	68	75	84	92	106	117	+117	
JUVENILE A	1998 – 1999	79	88	97	106	117	128	141	+141	
JUVENILE B	1996 – 1997	88	97	106	114	125	139	154	+154	
JUVENILE C	1993 – 1995	97	106	114	125	139	154	172	+172	
SENIOR	Various	97	106	114	125	139	154	172	+172	
MASTERS	Various	97	106	114	125	139	154	172	+172	

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50th STATE JUDO ASSOCIATION
ACCIDENT WAIVER AND OFFICIAL ENTRY FORM

(One form Per Division Entered)

SANCTION # **12-01-13**

EVENT: 20th Annual Sam Fujiyama Memorial Judo Tournament on January 15, 2012

In consideration of the acceptance of my entry, I do hereby for myself, my heirs, executors, administrators and assigns, waive, release and forever discharge any and all rights and claims for damages and losses which I may have or which may hereafter accrue to me against the 50th State Judo Association or its successors or assigns, for any and all injuries which may be sustained and suffered by me or my children in connection with my association with or entry in the 50th State Judo Association contest, or which may arise out of my traveling to, participating in, and returning from such contest.

EMERGENCY CONTACT: _____ PHONE NO: _____
(Name)

(Signature of parent or guardian of
contestant under 18 years of age.)

(Signature of Contestant)

_____ I will allow my child to participate in a SHIME-WAZA (CHOKING) division (please initial)

_____ I will allow my child to participate in a KANSETSU-WAZA (ARM BAR) division (please initial)

_____ I will officiate during this tournament.

Contestant's Name: _____
(Please Print) Last First MI

Address: _____ Apt #: _____ City: _____ Zipcode: _____
(Street #, Street Name)

Phone #: _____ Birthdate: ____/____/____ Age: _____

Rank: _____ Est. Weight: _____ Sex: M / F

If assistance/accommodation is needed (check off appropriate box): Vision Loss/Blindness Hearing Los/Deafness

Type of assistance/accommodation requested or name of person assisting: _____

Organization: _____ 50th State Judo Assn. _____ Judo Black Belt Association of Hawaii _____ Hawaii State Judo Assn.

USJF, USJA, or USJI #: _____ Expiration Date: _____

Instructor's Signature (Verifying contestant's age & competence): _____

Competition Division Entered: _____ Club Representing: _____

TO BE FILLED IN BY WEIGHT-IN OFFICIAL

WEIGHT AT TIME OF WEIGH-IN: _____ CORRECTED DIVISION IF APPLICABLE: _____

****CONTACT DEAN SHIRAKI [H] 626-1626 FOR CANCELLATIONS NO LATER THAN 6:00 PM, FRIDAY JANUARY 13, 2012**

Parent/Legal Guardian Consent for Competitors under 18 Years of Age:

I, the undersigned parent or legal guardian of the named contestant

_____, have read and understand the method of competition for
PRINT NAME OF CONTESTANT
this competition. Including contested weight categories and possible changes deemed necessary by the Tournament
Director for the safety of the sport and competitors involved. I have agreed to allow my child to participate in this event.

Parent/Guardian Signature

Date

Instructor/Coach Consent:

I, the undersigned Instructor/Coach, who holds the rank of Shodan or higher which has been awarded under the auspices of one of the following organizations: United States Judo Federation, USA Judo/United States Judo, Inc., or the United States Judo Association, have read and understand the method of competition for this tournament. Including contested weight categories and possible changes deemed necessary by the Tournament Director for the safety of the sport and competitors involved.

I hereby certify that _____,
PRINT NAME OF CONTESTANT

is of sufficient aptitude and skill in judo to participate in the tournament.

Instructor/Coach Signature

Date

Instructor/Coaches rank and organization it was obtained

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, _____ although not having been awarded the Judo rank of Shodan
(print name of contestant)

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 _____

Weigh in sites and times

*Participants can only enter 1 division.

Monday, January 9, 2012

Makiki Seidokan	6:00 pm to 7:30 pm
Salt Lake Judo Club	6:00 pm to 7:30 pm
Shobukan Judo Club	6:00 pm to 7:30 pm
Hodokan Judo Club	6:00 pm to 7:30 pm
Leeward Judo Club	6:00 pm to 7:30 pm
Kapolei Judo Club	6:00 pm to 7:30 pm
Pearl City Hongwanji	6:00 pm to 7:30 pm

Tuesday, January 10, 2012

Aiea Hongwanji	6:00 pm to 7:30 pm
Wadokan Judo Club	5:30 pm to 7:00 pm
Mililani Seidokan	5:30 pm to 7:00 pm

* Weigh in sites must email contestant list to Dean Shiraki- dkshiraki@aol.com;
by Wednesday, January 11, 2012

* Outer island - please email Dean Shiraki- dkshiraki@aol.com;
by Wednesday, January 11, 2012

