



2022 SHODAN SHIAI 1

50th State Judo Association
EVENT INFORMATION SHEET

SANCTION USJF # 22-07-03

DATE/TIME Sunday, July 31, 2022
Registration/warm-up - 8:00 a.m.
Competition - 9:00 a.m.

PLACE Salt Lake District Park Gym
1159 Ala Lilikoi Place
Honolulu, Hawaii 96818

HEAD REFEREE Ryan Shimokawa

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".

ELIGIBILITY Must be a current member of the United States Judo Federation (USJF), United States Judo, Inc. (USJI) or the United States Judo Association (USJA), "Must present card".
Contestant must be a Judo rank of Sankyu or higher & 13 years old and above.

FEES No Charge

RULES Current IJF Rules. Ippon and Waza-ari only.
Match length shall be 3 minutes. 2 minute maximum overtime limit.
No Kansetsu waza for anyone under the age of 15 years old.
Contest area will be 6 meters with 3 meter boarders.
The care system will not be used.

DIVISIONS

DIVISION	AGE	RANK	WEIGHT
1A-Kyu	13 years and up	Sankyu - Ikkyu	Light
1B-Kyu	13 years and up	Sankyu - Ikkyu	Middle
1C-Kyu	13 years and up	Sankyu - Ikkyu	Heavy
2A-Dan	13 years and up	Shodan and up	Light
2B-Dan	13 years and up	Shodan and up	Middle
2C-Dan	13 years and up	Shodan and up	Heavy

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50th State Judo Association
ACCIDENT WAIVER AND OFFICIAL ENTRY FORM



USJF Sanction # 22-07-03

DATE: July 31, 2022

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 _____
(Print Name)

(Signature of contestant)

(Signature of parent or guardian of contestant under the age of 18)

_____ 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 (please initial)

Contestant's name (print) _____
LAST FIRST MI

Address _____ Apt No _____ City _____ Zip code _____

Phone _____ Birthdate ____/____/____ Age _____

Rank _____ Est.Weight _____ Gender M / F

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

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ACCIDENT WAIVER AND CONSENT FORMS



USJF Sanction # 22-07-03

DATE: July 31, 2022

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 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 have agreed to allow my child to participate in this event.

Parent/Guardian Name (print) _____

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 _____ (name of contestant), is of sufficient aptitude and skill in judo to participate in the tournament.

Instructor's Rank _____ Rank obtained through (circle one) *USJI USJF USJA Judo Canada*

Instructor's Name _____

Instructor's Signature _____ Date _____

CERTIFICATE REGARDING NON-BLACK BELT CONTESTANTS

I, a Judo instructor, who has been awarded the Judo rank of Shodan or higher under the auspices of the USJF, USJA, or USA Judo, 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 tournament.

Instructor's Rank _____ Rank obtained through (circle one) *USJI USJF USJA Judo Canada*

Instructor's Name _____

Instructor's Signature _____ Date _____

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., 50th State Judo Association, Inc., Salt Lake Judo Club, Salt Lake District Park Gym, the City & County of Honolulu,** and the officers, employees, volunteers, and agents, 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, including United States Judo Federation, 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 (Releasees), 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., 50th State Judo Association, Inc., Salt Lake Judo Club, Salt Lake District Park Gym, and the City & County of Honolulu,** 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