KETTERING REC CENTER JUDO CLUB
2013 RULES CLINIC
JOINT OPEN WORKOUT
& OJI MEETING

NOTE TO ALL COMPETITORS, COACHES, REFEREES AND PARENTS:

The purpose of this event is to review, explain current interpretations, and answer questions about the competition rules to be used at judo events this year. This should be beneficial for referees, coaches, players and parents. It will also provide new players and experienced players the opportunity to work out with players from other clubs. This event will also be used as a first step in training new referees, timers, and other tournament officials.

Date: Sunday - April 28, 2013

Place: Kettering Recreation Center (Map Attached)
2900 Glengarry Drive
Kettering, Ohio 45429
937-296-2587

Sanction: USA Judo #: Applied

Eligibility: Current membership in the USJI, USJF or USJA is required
(Applications will be available at the tournament)

Sponsor: Kettering Rec Center Judo Club

Event Director: Russ Scherer (937) 427-5836

Schedule:
OJI Meeting: 11:30AM – 12:45PM (Conference Room #5)
Registration: 12:15PM – 12:45PM (Multi-purpose Room)
Clinic/Workout: 1:00PM – 5:00PM (Multi-purpose Room)

Participation Fee: $5
Map to Kettering Recreation Center, 2900 Glengarry Drive, Kettering, OH
KRC Judo Club Rules Clinic and Joint Workout
Kettering Recreation Center, Kettering, Ohio
Registration Form

Please Print Clearly

Name: ______________________________________ Date of Birth: _____________
Address: ___________________________________________ Rank: _____________
City: ____________________________________________ State: _______ Zip: ____________
Male _____ Female _____ Phone #: (____) _____-____________
Current Age ___ E-MAIL Address ______________________________________
Club: _________________________ Instructor’s Name: ______________________
USJI#: ___________ USJF#: ____________ USJA#: ___________ Expires: ____

Certificate Regarding Non-Black Belt Participants

I, _____________________, a Judo Instructor, who holds the Judo rank of Shodan or higher,
which has been awarded under the auspices of the United States Judo Federation, United States
Judo Association, or United States Judo, Inc., hereby certifies that the above Participant,
although not having been awarded the Judo rank of Shodan or higher, is of sufficient aptitude
and skill in Judo to participate in the above described event.

____________________________________
Signature of Judo Instructor

Please note Judo Insurance must be current. The Event Director reserves the right to make
any changes necessary for the successful operation of the event. Please remember to sign the
Waiver on the reverse side of this form.
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 Kettering Rec Center Judo Club Rules Clinic and Joint Workout and related events and activities of USA Judo, United States Judo Association, United States Judo Federation, Ohio Judo, Inc., City of Kettering, Kettering Recreation Center, and the Kettering Rec Center Judo Club, 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 condition(s) 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, traumatic brain injury, or death, and severe social and economic losses due not only my own actions, inactions or negligence, but also to the action, inaction 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 and discharge and covenant not to sue the United States Judo, Inc., United States Judo Association, United States Judo Federation, Ohio State Judo, Inc., City of Kettering, Kettering Recreation Center, and the Kettering Rec Center Judo Club, 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, guardian(s), supervisors and coaches, sponsoring agencies, sponsors, advertisers, and, if applicable, owners, lessors, and lessees of premises used to conduct the event, all of whom are hereafter referred to as "releasee", from any and all claims, demands, losses, or damages on account of injury, including permanent disability, traumatic brain injury, or death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the releasee 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 ON 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/GUARDIAN AS EVIDENCED BY THEIR SIGNATURE BELOW.

___________________________________  ___ ____________________________   __________
Participant                              Signature                     Date

FOR PARENTS/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 Releases, 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/Guardian (Please Print)                Parent/Guardian's Signature               Date