



KONAN YUDANSHAKAI
Rank Evaluation Shiai
USJF Sanction # 19-01-01

DATE: Sunday, January 20, 2019
LOCATION: Michigan State University
 IM West bldg 393 Chestnut
 East Lansing, Michigan 48824

PURPOSE OF THE

TOURNAMENT: Evaluate skill level against peers at your approximate weight, age and belt level.

TIME: Registration 10:00 AM to 11:00 PM
 Referees meeting 11:00 PM
 Kata 11:15 AM
 Shiai 12:00 PM

ENTRY FEE: Advanced Registration postmarked by **January 12, 2019** is \$25.00
 Late registration or registration at the door: \$35.00

CONTEST RULES: Current International Judo Federation Rules as modified:

1. Junior Division - Juvenile A (age 7 to 12) No kansetsu waza or Shime waza is allowed.
 Juvenile B (age 13 to 16) No kansetsu waza allowed (age 13 to 16)
2. Senior Division – No Kansetsu waza is allowed in Novice division regardless of competitor's age (Minimum age to enter senior division is 16 years). Sankyu and above will be allowed to use Kansetsu waza
3. Pre 2003 medical rule will be used for Jr. Division's only
4. Blue belts must be worn by the blue competitor and a white belt must be worn by the white competitor.
5. Match times: 3 minutes for juniors and 4 minutes for seniors.
6. For youth 10 and under there may be co-ed competition at the discretion of the tournament director.
7. **Zories (footwear) must be worn when off the mat**
8. Care System will be used.
9. Contest area will be 8 meters x 8 meters with a 4 meter safety zone between adjoining mats and 3 meter safety area everywhere else.

ELIGIBILITY: U.S.J.F. sanctioned. Must present have a current USJ.F, USJA or USJI card. U.S.J.I., U.S.J.F. and U.S.J.A. registration are available at the tournament site. All junior's competitors must have a signed consent head up concussion form

DIVISIONS:	Boys & Girls*:	7-8 years	Light, Medium, & Heavy
		9-10 years	Light, Medium, & Heavy
		11-12 years	Light, Medium, & Heavy
		13-14 years	Light, Medium, & Heavy
		15-16 years	Light, Medium, & Heavy

**Matches will be formed by belt color, age and weight.*

Men & Women:	White, Green, Blue Belts	Light, Medium, & Heavy
	Brown Belt (Sankyu, Nikyu)	Light, Medium, & Heavy
	Brown Belt (Ikkyu), Black Belt	Light, Medium, & Heavy
	Masters (30-45)	Light, Medium, & Heavy
	Masters (46-over)	Light, Medium, & Heavy

ELIMINATION: Round Robin – If there is only two are in a pool, competitors will have at least two matches. If it's splits after second match will have another match to find the winner of the pool

AWARDS: 1st, 2nd, 3rd place ribbons

TOURNAMENT DIRECTOR: Mrs. Emily Burger
HEAD SCORER Mr. Joe Van Den Boom
HEAD REFEREE: Mr. Neil Simon IJF-B

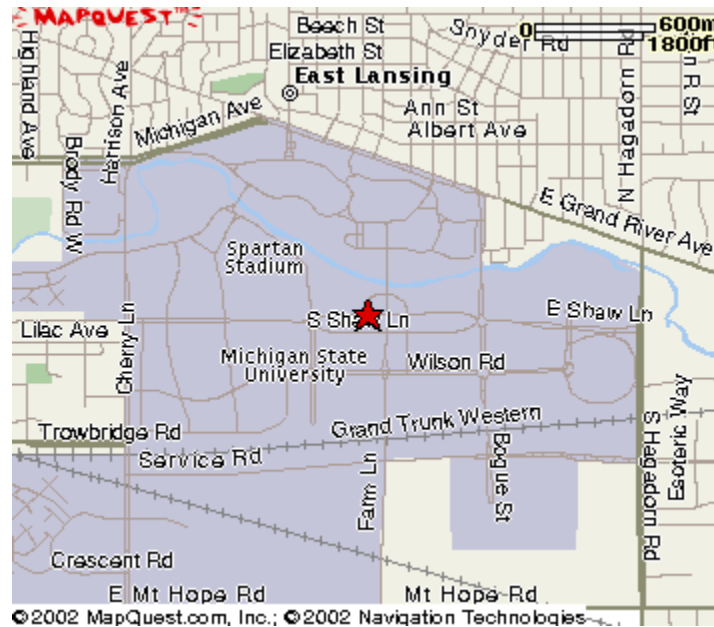
JURY: Mr. Don Flagg PJC-C, Mr. Jerry Wee PJC-C, and Mr. Tom Sheehan IJF-B

Beginners or Novice Referees may referee if they are 10 years or older. They can only officiate matches that are his or hers age and below their age. They must have a white shirt, dark color pants, and dark color socks. They must attend the referee meeting. **All certified referees must wear polo shirt or formal referee outfit.**

The tournament director reserves the right to make necessary adjustments regarding the conduct of this tournament, as he deems necessary in the best interest of the participants. The tournament director may refuse any entry that is found to contain false information. "Coaches, Instructors, & Parents will have the opportunity to review the categories and confirm their child / athlete's suitability for participation



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Tournament Site: IM West Bldg 393 Chestnut East Lansing, Michigan 48824
The bldg is next to stadium on the West side

Hotel Information: Kellogg Center, 3600 S. Harrison Rd. (517) 432-4000
Red Roof Inn, 3615 Dunckel Rd. (517) 332-2575



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KATA

PERFORMANCE REQUIREMENTS

- Nage No Kata & Ju No Kata Only
- Novice and advanced categories
- No separate categories for Men / Women or mixed pairs

NOVICE (ikkyu or lower)	ADVANCED (shodan and above)
<ul style="list-style-type: none"> • Nage-no-Kata First three sets of Nage-no-Kata (Te-, Koshi- and Ashi-waza) • Ju-no-Kata Requirements: First two sets 	<ul style="list-style-type: none"> • Nage-no-Kata Requirements: All five sets of Nage-no-Kata • Ju-no-Kata Requirements: All three sets

KATA COMPETITION FEES

PRE-REGISTRATION Kata:

- **\$10.00 (NO REFUNDS)**

Send by **January 21, 2019** completed entry form and entry fee to

Mrs. Emily Burger
27615 24 Mile Rd
Chesterfield, MI 48051

- **ON SITE REGISTRATION**

- **\$20.00 (NO REFUNDS)**

Official use only

DIVISION(s): _____ SEX: <input type="checkbox"/> Male <input type="checkbox"/> Female OFFICIAL WEIGHT: ___ lbs Payment mode: <input type="checkbox"/> Check # _____ /amt _____ <input type="checkbox"/> Cash \$ _____	Primary Card Registrar Verification: _____
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Kata Registration Form

PLEASE MAKE CHECK PAYABLE TO: KONAN JUDO ASSOCIATION

Complete the Kata Registration Form. Please cut out the completed registration form and attach it along with the competition waivers for each team member. Please include the relevant entry fees. If entering more than one Kata division, please fill out the 2nd competition entry form.

1st competition:

Kata: Nage no Kata Ju no Kata **Level:** Beginning Advanced

Tori Name: _____ **Date of Birth:** _____ **Rank:** _____

Uke Name: _____ **Date of Birth:** _____ **Rank:** _____

Judo Club: _____ **Kata Instructor:** _____

2nd competition (if competing in both katas)

Kata: Nage no Kata Ju no Kata **Level:** Beginning Advanced

Tori Name: _____ **Date of Birth:** _____ **Rank:** _____

Uke Name: _____ **Date of Birth:** _____ **Rank:** _____

Judo Club: _____ **Kata Instructor:** _____

I HAVE INCLUDED A KATA REGISTRATION PAYMENT OF \$10 \$20



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Official use only

DIVISION(s): _____	SEX: <input type="checkbox"/> Male <input type="checkbox"/> Female	OFFICIAL WEIGHT: ___ lbs	
Payment mode: <input type="checkbox"/> Check # _____ /amt _____		<input type="checkbox"/> Cash \$ _____	Primary Card Registrar Verification: _____

**2019 Konan Rank Evaluation
OFFICIAL ENTRY FORM**

Enclosed is a pre-registration fee of \$25.00 for each individual event in the 2019 Konan Rank Evaluation tournament, **January 20, 2019** to be held at the Michigan State University, IM Bldg.-West East Lansing, Michigan. For Entry Forms received after **January 13, 2019** and entry at the tournament site an ENTRY FEE of \$35.00 for Shiai. Send pre-registration forms and entry fee to

Mrs. Emily Burger
27615 24 Mile Rd
Chesterfield, MI 48051

If you have questions please contact her at (586) 6153247 or via e-mail: eberger@yahoo.com
Make check payable to **Konan Judo Association**. Entry fees are not refundable!

NAME: _____			
ADDRESS: _____		CITY: _____	STATE: ___ ZIP: _____
PHONE: ()- ___ - _____		e-mail: _____ @ _____	BIRTH DATE: ___ / ___ / ___
CLUB: _____		RANK: _____	
AGE: _____	SEX: _____	USJI, USJF, USJA (circle one) # _____	Exp. Date _____
JUDO CANADA PASSPORT # _____			

If assistance/accommodation is needed (check off appropriate box) <input type="checkbox"/> Vision Loss/Blindness	
<input type="checkbox"/> Hearing loss/Deafness	<input type="checkbox"/> Other _____ Type of assistance/accommodation requested or name of person assisting _____

Certificate Regarding Non-Black Belt Contestants

I, _____ a Judo instructor, who has been awarded the Judo rank of Shodan or
(Print name of Instructor)
higher, under the auspices of USJI, USJF, USJA OR JUDO CANADA, hereby certify that,

_____ although not having been awarded the Judo rank of Shodan or higher,
(Print name of Contestant)
is of sufficient aptitude and skill in Judo to compete in these Championships.

Judo Instructor (print) _____ Date _____

Signature of Instructor _____ Rank ___ dan Org JI JF JA Date of Expiration ___ / ___ / ___

WARNING!
WAIVER AND RELEASE OF LIABILITY AND AGREEMENT TO PARTICIPATE
(Including Limited Co-Ed Competition for Age 10 and Under for USJF Sanction)

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., Konan Judo Association Inc., Judo Affiliates of Michigan, Inc., Michigan State University, and Michigan State Judo Club**, 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., Konan Judo Association Inc., Judo Affiliates of Michigan, Inc., Michigan State University, and Michigan State Judo Club**, 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. CONSISTENT WITH THE BY-LAWS OF USJF, THIS TOURNAMENT MAY INCLUDE CO-ED COMPETITION FOR AGES 10 AND UNDER IN COMPARABLE AGE/WEIGHT DIVISIONS WHERE THERE IS AN INSUFFICIENT NUMBER OF GIRLS FOR NON-CO-ED AGE/WEIGHT DIVISIONS. I HAVE READ AND UNDERSTAND THE TOURNAMENT ANNOUNCEMENT CONCERNING THESE SPECIAL DIVISIONS. 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 Form 514, V6.0.0, 090818



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HEAD UP WAIVER

For those under 18; this form must be signed by the parent or guardian and minor

CONCUSSION DANGER SIGNS

In rare cases, a dangerous blood clot may form on the brain in a person with a concussion and crowd the brain against the skull. An athlete should receive immediate medical attention if after a bump, blow, or jolt to the head or body s/he exhibits any of the following danger signs:

- One pupil larger than the other
- Is drowsy or cannot be awakened
- A headache that gets worse
- Weakness, numbness, or decreased coordination
- Repeated vomiting or nausea
- Slurred speech
- Convulsions or seizures
- Cannot recognize people or places
- Becomes increasingly confused, restless, or agitated
- Has unusual behavior
- Loses consciousness (even a brief loss of consciousness should be taken seriously)

WHAT SHOULD YOU DO IF YOU THINK YOUR ATHLETE HAS A CONCUSSION?

1. If you suspect that an athlete has a concussion, remove the athlete from play and seek medical attention. Do not try to judge the severity of the injury yourself. Keep the athlete out of play the day of the injury and until a health care professional, experienced in evaluation for concussion, says s/he is symptom-free and it's OK to return to play.
2. Rest is key to helping an athlete recover from a concussion. Exercising or activities that involve a lot of concentration, such as studying, working on the computer, and playing video games, may cause concussion symptoms to reappear or get worse. After a concussion, returning to sports and school is a gradual process that should be carefully managed and monitored by a health care professional.
3. Remember: Concussions affect people differently. While most athletes with a concussion recover quickly and fully, some will have symptoms that last for days, or even weeks. A more serious concussion can last for months or longer.

WHY SHOULD AN ATHLETE REPORT THEIR SYMPTOMS?

If an athlete has a concussion, his/her brain needs time to heal. While an athlete's brain is still healing, s/he is much more likely to have another concussion. Repeat concussions in your athletes can result in brain swelling or permanent damage to their brain. They can even be fatal.

By my name and signature below, I acknowledge in accordance with Public Acts 342 or 2012 that I received and reviewed this concussion educational material.

STUDENT-ATHLETE NAME PRINTED

STUDENT-ATHLETE NAME SIGNED

DATE

PARENT OR GUARDIAN NAME PRINTED

PARENT OR GUARDIAN NAME SIGNED

DATE