2020 Michigan State Games Judo-
USA Masters Games
Sanction: USJF# 20-06-01
https://www.usamastersgames.com/judo

DATE: Saturday, June 27, 2020
LOCATION: Kroc Center
2500 S. Division Street. NE
Grand Rapids, MI 49507

ELIGIBILITY: All contestants must provide a valid U.S.J.F., U.S.J.I., or U.S.J.A. card.
Foreign contestants must have the proper ID from their home country.
1. You must present the primary membership card that shows the insurance coverage is current. If you do not
present the membership card, you must purchase a membership card on site.
2. U.S.J.I., U.S.J.F and U.S.J.A. membership registration will be available at the tournament site.

SCORING SYSTEM: Modified Double Elimination (6 or more in a division)
Round Robin (5 or less in a division)

MATCH TIMES:
Ages 20-39 4 minutes
Ages 40-59 3 minutes
Ages 60+ 2 minutes

RULES: The current contest rules of the International Judo Federation (I J F) as modified will be in use:
1) Current IJF Gi rules for size only (Red Labeled Gi’s not required)
2) GOLDEN SCORE will apply to ALL DIVISIONS. There will be Hantei when neither contestants score by the end of the
over time match period. Golden Score Match time is one minute.
3) All competitors must bring a white and blue belt to wear for competition. If you only have one gi, it must be white to
compete and when you are on the blue side you must have a blue belt!
4) All competitors must bring and wear footwear when not on the mat
5) The contest area will be 8x8 with 4 meter safety zone and out of bounds area between adjoining contest area and 3 meters
everywhere else.
6) Care system will be in use

<table>
<thead>
<tr>
<th>Gender</th>
<th>AGE</th>
<th>WEIGHT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>Age 21-24</td>
<td>- light, middle and heavy</td>
</tr>
<tr>
<td>Categories will be further subdivided by belt</td>
<td>Age 25-29</td>
<td>- light, middle and heavy</td>
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<td>Age 30-34</td>
<td>- light, middle and heavy</td>
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<td>Age 35-39</td>
<td>- light, middle and heavy</td>
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<td></td>
<td>Age 40-44</td>
<td>- light, middle and heavy</td>
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<tr>
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<td>Age 45-49</td>
<td>- light, middle and heavy</td>
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<td>Age 50-54</td>
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<td>Age 55-59</td>
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<td>Age 60-64</td>
<td>- light, middle and heavy</td>
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<td></td>
<td>Age 65-69</td>
<td>- light, middle and heavy</td>
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<td></td>
<td>Age 70-74</td>
<td>- light, middle and heavy</td>
</tr>
<tr>
<td></td>
<td>Age 75+</td>
<td>- light, middle and heavy</td>
</tr>
<tr>
<td>Male</td>
<td>Age 21-24</td>
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</table>

White/Green/Blue, Brown, and Black

Gender AGE WEIGHT
2020 Michigan State Games Judo-
USA Masters Games
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https://www.usamastersgames.com/judo

TOURNAMENT DIRECTORS:
Jim Murray  Neil Simon, Assistant
(616) 293-1568 (248) 358-0121

HEAD REFEREE:  Tom Sheehan – IJF B
JURY:  Don Flagg PJU C – Neil Simon  IJF B
HEAD SCOREKEEPER:  Joe Vandenboom

REFEREE MEETING:  9:30 a.m. – 10:00 a.m.
Referees: Polo shirts or traditional uniforms can be worn

The tournament directors reserve the right to make necessary adjustments regarding the conduct of this tournament as they deem necessary in the best interest of the participants. The tournament directors may refuse any entry that is found to contain false information.

ENTRY FEES:
Early Registration at:  https://www.usamastersgames.com/judo

<table>
<thead>
<tr>
<th>Shiai – Cost per contestant</th>
<th>Online Before 6/5</th>
<th>Online Before 6/19</th>
<th>Paper On-Site</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$50.00</td>
<td>$60.00</td>
<td>$70.00</td>
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</tbody>
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If assistance/accommodation is needed (check off appropriate box)
☐ Vision Loss/Blindness  ☐ Hearing loss/Deafness  ☐ Other _______________________
Type of assistance/accommodation requested or name of person assisting _______________________

Event Admission $5 per person. Ages 5 & Under- Free

REGISTRATION AND WEIGH IN:
June 27, 2020

<table>
<thead>
<tr>
<th>Division</th>
<th>Registration / Weigh In</th>
<th>Compete</th>
</tr>
</thead>
<tbody>
<tr>
<td>ALL Masters Divisions</td>
<td>9:00 a.m. - 10:00 a.m</td>
<td>12:00 Noon</td>
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</table>

Note: Individual Awards will be awarded right after the division concludes, and Special Awards will be awarded right after the completion of the tournament.
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Area Accommodations *

Visit https://app.eventconnect.io/events/9081/hotels?nav=hidden for lodging information

Location of Kroc Center, 2500 S. Division Street, Grand Rapids, MI 49507

Vendors

Attention all vendors. Sponsorship and space is available.
Please contact Jim Murray at 616-293-1568 for additional information
On-site Registration Form - Sanction: USJF# 20-06-01
Make checks payable to JAM. Entry fees are not refundable!

CONTESTANT’S (PLEASE PRINT)

<table>
<thead>
<tr>
<th>NAME:</th>
<th>Sex: □ Male: □ Female:</th>
</tr>
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<tbody>
<tr>
<td>Last</td>
<td>First</td>
</tr>
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</table>

ADDRESS: ____________________________  PHONE: ____________________________
CITY: ____________________________  STATE: ____________________________  ZIP: ____________________________
E-MAIL: ____________________________

AGE ______  DATE OF BIRTH ______  CLUB ____________________________  RANK ____________________________

CURRENT PRIMARY REGISTRATION #: (circle one)  Expiring Date:
USJI  USJA  USJF  No.: ____________________________

FOREIGN CONTESTANT’S NGB #  Expiring Date:

DIVISION(s) YOU WISH TO ENTER: ____________________________  RANK: ____________________________

If assistance/accommodation is needed (check off appropriate box)

□ Vision Loss/Blindness  □ Hearing loss/Deafness  □ Other ____________________________

Type of assistance/accommodation requested or name of person assisting ____________________________

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WAIVER AND RELEASE OF LIABILITY AND AGREEMENT TO PARTICIPATE, (see reverse side) and CERTIFICATE REGARDING NON-BLACK BELT CONTESTANTS must be executed and returned with the ENTRY FORM.

CERTIFICATE REGARDING NON-BLACK BELT CONTESTANT

I, ____________________________, a Judo instructor who holds the Judo Rank of Shodan or higher which has been awarded under the auspices of United States Judo, Inc., United States Judo Federation, or United States Judo Association, hereby certifies that the above Contestant, although not having been awarded the Judo Rank of Shodan or higher is of sufficient aptitude and skill in Judo to compete in the above-described event.

______________________________  /  /  Rank _______dan  Card Expiration  /  /
(Signature of Judo Instructor)  Date  Judo Org □ USJF  □ USJA  □ USJI  □ Other ____________________________

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 Yudanshakai, Inc., Judo Affiliates of Michigan, Inc., Kroc Center, and Godai Judo, 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.

__________________________________  ____________________________ __  _________________
Participant  Participant’s Signature  Date