

Fort Worth Judo Open Saturday, January 26, 2019 Fort Worth, Texas



FOR ALL COMPETITORS SENIORS AND JUNIORS NOVICE AND ADVANCED

• NO HANSOKUMAKE FOR LEG GRABS

ONLINE ONLY REGISTRATION BY JAN 24TH

• \$25 ENTRY FEE

• SELF WEIGH-IN WITH VERIFICATION ON-SITE

LOCATION	Fort Worth Judo Club 5302 Trail Lake Drive, Fort Worth, TX 76133 Phone: 817-207-9500
REGISTRATION DEADLINE	THURSDAY, JAN 24, 2019 AT 11:59PM ONLINE ONLY AT JUDOCOMP.COM
SELF WEIGH-IN	SELF WEIGH-IN INSTRUCTIONS: Submit your weight online in KILOGRAMS (pounds ÷ 2.2) You will be given a one KILOGRAM allowance at verification
SCHEDULE	SATURDAY, 1/26/20198AM-8:30AMWeight verification9:00AMCompetition begins
PLAYER ELIGIBILITY	Open to all competitors age 5 and up. Age groups determined by birth year. Novice Divisions are for up to 1 year judo, yellowbelt or below. All competitors must be current USA Judo, USJA, USJF, ATJA or AJJF members. (you may register with USA Judo at the tournament)
DIVISIONS	Age and weight cutoffs for all Junior divisions will be determined after reg- istration closes. The tournament director reserves the right to modify any division to ensure adequate competition and safety of all of the contestants.
RULES	IJF rules with one exception: Shido only for leg grabs.
ENTRY FEE	\$25 Online at judocomp.com
ELIMINATION METHOD	Divisions of 5 or less are Round Robin , 6 or more true double elimination
	Kan Sajala nh 214 762 2222 kasjala@agatajdadaja apm

STAFF Ken Scialo, ph 214-762-2222 kscialo@eastsidedojo.com Tommy Dver_ph: 817-235-6094__tommy_dver@chdfw_com

FORT WORTH JUDO CLUB TOURNAMENT 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 Fort Worth Judo Open and related activities of United States Judo Inc., the American Traditional Judo Association, the American Judo and Jujitsu Federation, Texas Judo Inc., the United States Judo Federation, the United States Judo Association, Dallas Judo, Inc., Eastside Dojo, Fort Worth Judo and Shufu Judo Yudanshakai.

I hereby,

1. Acknowledge that I am familiar with the sport of Judo and understand the rules governing the sport of Judo and the importance of following these rules.

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 or a tournament official of such condition(s) and refuse to participate.

3. Acknowledge and fully understand that I will be participating in a sport that might result in serious injury, including permanent disability or death, and severe social and economic loss due not only to my actions, inactions, or negligence, but also to the action, inaction, or negligence of others, the rules of Judo, or the 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 Judo, I assume that risk and accept the responsibility for the damages following such injury, death or permanent disability.

5. Release, waive and discharge and covenant not to sue **United States Judo Inc.**, the American Traditional Judo Association, the American Judo and Jujitsu Federation, Texas Judo Inc., the United States Judo Federation, the United States Judo Association, Dallas Judo, Inc., Eastside Dojo, Fort Worth Judo and Shufu Judo Yudanshakai together with their affiliated clubs, their respective administrators, directors, agents, coaches, and other employees or volunteers or 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 hereinafter referred to as "releasee", from any or all claims, demands, losses or damages on account of injury, including permanent disability and death or damage to property, caused or alleged to be caused in whole or part by the negligence of the releasees or otherwise to the fullest extent permitted by law.

I HAVE READ THE ABOVE WARNING, WAIVER AND RELEASE, UNDERSTAND THAT I GIVE UP SUB-STANTIAL RIGHTS BY SIGNING IT, AND KNOWING THIS, SIGN IT VOLUNTARILY. I AGREE TO PAR-TICIPATE KNOWING THE RISKS AND CONDITIONS INVOLVED AND TO DO SO ENTIRELY OF MY 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's Printed Name

Participant Signature

Date

FOR PARENTS/GUARDIANS OF PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT TIME OF REG-ISTRATION)

THIS IS TO CERTIFY THAT I, AS PARENT/GUARDIAN WITH LEGAL RESPONSIBILITY FOR THIS PAR-TICIPANT, DO CONSENT AND AGREE TO HIS/HER RELEASE, AS PROVIDED ABOVE, OF ALL THE RE-LEASEES, 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 CONDI-TIONS AND THEIR RAMIFICATIONS.