





PRESENTS THE

20th ANNIVERSARY OF "THE ROCK & ROLL CAPITAL OF THE WORLD" JUDO TOURNAMENT

Saturday September 19th, 2015

Cloverleaf Recreation Center 8525 Friendsville Road Lodi, Ohio 44254 (330)-948-1323

Electronic Scoring! Concession Stand!

Featuring
Junior, Senior, Master & Kata
Competition

Medals will be awarded for 1st, 2nd, & 3rd for Shiai and Kata Competition

"ROCK & ROLL CAPITAL OF THE WORLD" 20th ANNIVERSARY JUDO TOURNAMENT

DATE: Saturday, September 19, 2015

LOCATION: Cloverleaf Recreation Center

8525 Friendsville Road

Lodi, Ohio 44254 (330)-948-2300

SANCTION: USA Judo # 2015-06-09

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.

NOTE: Membership registration available at the site.

SCORING: Modified Double Elimination (4 or more in a division)

Round Robin (3 or less in a division)

MATCH TIMES: Sr. Men & Women Black & Brown Division 5 min. all other Divisions 3 min.

RULES: The current rules of the International Judo Federation (IJF) as modified.

1. Junior Division – 8 through 16 years of age

- a. Juvenile A (age 13 through 16) No Kansetsu waza allowed Shime waza allowed
- b. Juvenile B (8 through 12) No Kansetsu waza allowed, No Shime waza allowed
- 2. Kansetsu waza allowed in all Senior Divisions (minimum age for senior division is 13).
- 3. Current IJF Medical Rules All Divisions
- 4. Must be in Judo Gi to receive your Trophy
- 5. Blue & White belts required.
- 6. The contest area will be 10x10 with 4 meter safety zone and out of bounds area between adjoining contest area and 3 meters everywhere else.

Junior Boys:

Age		Age	
6 & und	er Light Medium and Heavy	7/8	Light Medium and Heavy
9/10	Light Medium and Heavy	11/12	Light Medium and Heavy
13/14	Light Medium and Heavy	15/16	Light Medium and Heavy

Junior Girls:

Age	Age
Age	Age

6 & under Light and Heavy 7/8 Light and Heavy 9/10 Light and Heavy 11/12 Light and Heavy

13/14 Light and Heavy 15/16 Light and Heavy

Masters: 30-39 1983 & older Light, Medium, Heavy

40 + 1973 & older Light, Medium, Heavy

Senior Men: White & Green, Brown Belt, Black Belt

(Brown Belt may enter Black Belt Div.) -132, -145, -161, -178, -198, -220, +220

Senior Women: White & Green, Brown & Black Belts

-106, -114, -125, -139, -154, -172, +172

Kata: Nage No Kata, Katame No Kata, Ju No Kata,

Goshinjutsu, Itsutsu No Kata - Mixed (coed) teams OK.

AWARDS: Individual Competition - 1st, 2nd, & 3rd awards.

Medals for Junior and Senior Divisions.

Kata Competition Medals for 1st and 2nd place teams Best Technique Award for Senior & Junior division Fighting Spirit Award for Senior & Junior division

Note: Individual Awards awarded right after the division concludes. Special Awards at the end of Jr.& Sr. division.

ENTRY FEES: Pre-Registration by September 14

1. Same person entering more than one division 1st division \$40. each additional is \$20.

2. Family entries (must be from same family)
1st member \$40. each additional is \$ 20.

Kata Teams 1st Kata \$50, additional Kata's \$25

Registration at Tournament Site

1. Same person entering more than one division 1st division \$50. each additional is \$25.

2. Family entries (must be from same family)
1st member \$50. each additional is \$25.

Kata Teams 1st Kata \$60, additional Kata's \$35

REGISTRATION AND WEIGH IN DEADLINES:

Division	Registration/Weigh in	Compete	
Jr.'s 6-10 & Kata	8:00 - 9:00 a.m.	10:00 a.m.	
Jr.'s 11-16	9:00 - 10:00 a.m.	11:00 a.m.	
Master	10:00 - 11:00 a.m.	12:00 p.m.	
Seniors	11:00 - 12:00 p.m.	1:00 p.m.	

TOURNAMENT DIRECTORS: Michael Mooney Mark Hunter

29460 Miles Road Solon Ohio 44139

440-376-1376 419-722-3476

E-Mail: <u>judomooney@gmail.com</u> <u>markjudo@aol.com</u>

HEAD REFEREE: TBA

KATA JUDGES: TBA

REFEREE MEETING: 9:00 - 9:45 a.m.

Cloverleaf Recreation Center 525 Friendsville Road - Lodi, Ohio 44254





"THE ROCK & ROLL CAPITAL OF THE WORLD" JUDO TOURNAMENT 2015 Registration Form

Send Pre-registration forms and entry fees made payable to: Chu To Bu Judo Club, Inc. 29460 Miles Road Solon, Ohio 44139

Circle ONE of the following: Juniors – Seniors - Masters
(KATA) Ju no Kata - Katame no Kata - Nage no Kata – Goshinjutsu – Itsutsu no Kata
(Submit separate form for each division you want to enter)

(12.00	f = f		,	
Please Print Clearly	(Kata	a Partner:)
Name:		Dat	e of Birth:	
Address:			Rank:	·
City:		State:	Zip: _	
Division: Male	Female	Phone #: ()	-
Current Age E-M	IAIL Address		_ School _	
Club:	Inst	ructor's Name: _		· · · · · · · · · · · · · · · · · · ·
USJI#:	USJF#:	USJA#:		_Expires:
<u>Ce</u>	rtificate Regarding No	n-Black Belt Cont	<u>estants</u>	
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 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.				
	Signature of J	udo Instructor		
Please note Judo Insurance must be current. The Tournament 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.				
	FOR OFFICIA	L USE ONLY:		

M / F AGE: ___ INSURANCE: ___ WEIGHT: ____ DIVISION:____

WAIVER, RELEASE OF LIABILITY, AND AGREEMENT TO PARTICIPATE

In consideration of being permitted to participate in any way, including travel to and from, the 2015 Rock & Roll Capital of the world Judo Tournament and related events and activities of United States Judo, Inc., United States Judo Association, United States Judo Federation, Ohio Judo, Inc., City of Lodi, Cloverleaf Recreation Center, Chu To Bu Judo Club, Inc. and the Ameri-Kan 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 or death, Traumatic Brain Injury (TBI), 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 Judo, Inc., City of Lodi, Cloverleaf Recreation Center, Chu To Bu Judo Club, Inc, and the Ameri-Kan 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 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.

		ID THAT I GIVE U
SUBSTANTIAL RIGHTS BY SIGNING 1	IT, AND KNOWING THIS, SIGN IT	VOLUNTARILY.
AGREE TO PARTICIPATE KNOWING	THE RISKS AND CONDITIONS INVO	LVED AND DO S
ENTIRELY ON MY OWN FREE WILL. 1	I AFFIRM THAT I AM AT LEAST 18 Y	EARS OF AGE, O
IF I AM UNDER 18 YEARS OF AGE, I	HAVE OBTAINED THE REQUIRED	CONSENT OF M
PARENT/GUARDIAN AS EVIDENCED BY	Y THEIR SIGNATURE BELOW.	
Participant	Signature	Date
1	Ç	
FOR PARENTS/GUARDIA	NS OF PARTICIPANTS OF MINORITY	
FOR PARENTS/GUARDIA	Ç	

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 Releases 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.

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Parent/Guardian (Please Print)	Parent/Guardian's Signature	Date