

2010 Chuka Spring Promotional Tournament
Hosted by Visalia YMCA Judo Club

SANCTION
NUMBER: 10-04-16

Your Judo Club is cordially invited to participate in the Visalia YMCA Judo Tournament sponsored by the Visalia YMCA Judo Club, and the Central California Judo Black Belt Association.-Chuka Yudanshakai Tournament sanction by the United States Judo Federation (U.S.J.F.). The tournament is for the promotion of Chuka members.

DATE: Sunday, April 25, 2010

LOCATION: Mt. Whitney High School Gymnasium
900 South Conyer Street
Visalia, CA 93277

TIME: 11:00 A.M.

ELIGIBILITY: Current members of the USJF, USJI, or USJA. Only Chuka members will be promoted.
(MUST PRESENT VALID CARD AT TIME OF REGISTRATION)

ENTRY FEE: \$25.00 for all contestants, make checks payable to: **Visalia YMCA Judo Club.**

REGISTRATION: All junior (12 years and under)
Intermediate (13-16 years old)
Seniors (17+)
Shiai begins at 11:00 A.M.

8:00 to 10:00 A.M.
8:00 to 10:00 A.M.
11:00 A.M.

OFFICIAL MEETING: A meeting of all timekeepers, scorekeepers, and referees-10:30 A.M.

FORMAT: Pool system in various age and weight categories to be determined by the Tournament Director to optimize competition and safety. All matches "Stop Time" clock stops on Matte.

JUNIORS, INTERMEDIATES 3 MINUTES
SENIOR WHITE AND BROWN BELTS 3 MINUTES
SENIOR BLACK BELTS 4 MINUTES

CONTEST RULES: Current IJF Contest Rules will be used with the following modifications:

1. No Double Knee Drop Seoinage will be allowed for contestants 12 years old and under
2. No Shime Waza (choking techniques) for 12 years old and under. If a 12 year old or younger constestant is pooled with 13-year-old contestants, choking techniques will not be allowed for all the contestants in that pool.
3. Kansetsu Waza (Joint lock techniques) will be allowed in the Black Belt division only.
4. Waki-Gatame and Juji Gatame (flying armlock) will not be allowed from a standing position.
5. Pre-1994 rules regarding the safety zone and out of bounds area.
6. Pre 2003 IJF Medical Rule except for the Black Belt division.

SCORING SYSTEM: Places will be determined according to the following criteria, in this order:

1. Most Wins
2. If the number of wins is tied, the most points
3. If two contestants are tied in wins and points – then revert to results of head to head match, whomever competed, they will be given the option to compete, if the sizes are not that different. If this situation arises and there is question about his, consult the Tournament Director.
4. In all other cases not covered by these rules, consult Tournament Director.

IPPON – 10 PTS

WAZA ARI – 7 PTS

YUKO – 5 PTS

DECISION – 1PTS

AWARDS: Medals will be awarded in each pool for first, second, and third places.

For further information, or clarification contact: Tom Jay, Tournament Director (559) 562-1134

2010 CHUKA SPRING PROMOTIONAL TOURNAMENT

COMPETITION DIVISIONS

Boy's Divisions Advanced (Orange/Green/Blue/Purple/Brown) Anyone over 20 pounds of his age group will go to the next age and weight, up to 14 yrs.

5-6	LW	MW	HW
7-8	LW	MW	HW
9-10	LW	MW	HW
11-12	LW	MW	HW
13-14	LW	MW	HW
15-16	LW	MW	HW

Girl's Divisions Advanced (Orange/Green/blue/Purple/Brown)

5-6	LW	MW	HW
7-8	LW	MW	HW
9-10	LW	MW	HW
11-12	LW	MW	HW
13-16	LW	MW	HW

Boy's & Girl's Divisions Novice (White/Yellow)

5-6	LW	MW	HW
7-8	LW	MW	HW
9-10	LW	MW	HW
11-12	LW	MW	HW
13-16	LW	MW	HW

Men's & Women's Senior Novice Divisions (Under Sankyu)

LW	MW	HW
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Men's & Women's Master's Divisions

35-44	LW	MW	HW
45+	LW	MW	HW

Senior Brown & Black Belt Divisions

(All non-black belts **MUST** complete a non-black belt waiver)

Men	LW	MW	HW
Women	LW	MW	HW

**DIVISIONS MAY BE COMBINED AT THE DISCRETION OF
THE TOURNAMENT COMMITTEE**

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(Sanctioned by the United States Judo Federation)

Mt. Whitney High School Gymnasium
900 S. Conyer Street
Visalia, California 93277

Sunday, April 25, 2010
USJF Sanction: 10-04-16

OFFICIAL ENTRY FORM

OFFICIAL USE ONLY – DO NOT WRITE INSIDE THIS BOX

AGE	SEX	BELT/COLOR RANK	WEIGHT	DIVISION	FEES PAID
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Please Type or Print. This form must be approved and stamped by REGISTRATION before going to weight-in:

NAME:

Last

First

M.I.

ADDRESS:

Number

Street

City

State

ZIP Code

JUDO RANK (Belt Color):

KYU:

DAN:

NAME OF DOJO:

INSTRUCTOR:

DATE OF BIRTH:

AGE:

WEIGHT:

Circle One: MALE/FEMALE

EMERGENCY CONTACT:

TELEPHONE #:

USJF #:

USJI #:

USJA #:

Expiration Date:

CERTIFICATE REGARDING NON-BLACK CONTESTANTS

I, name of instructor) _____, a Judo instructor who has been awarded the Judo rank of Shodan or higher, under the auspices of the United States Judo, Inc., the United States Judo Federation hereby certify that (name of contestant) _____ although not having been awarded the rank of Shodan or higher, is of sufficient aptitude and skill in Judo to compete in the black belt division at the 2009 Chuka Spring Promotional Tournament.

Signature of Judo Instructor

Print Name of Judo Instructor

Judo Rank

Date

OFFICIAL USE ONLY

MALE: _____ FEMALE: _____ AGE: _____ WEIGHT: _____

RANK: OW: _____ 1Y: _____ 2O: _____ 3G: _____ 4B: _____ 5P: _____ 6Br: _____ 7B1: _____

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 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., Chuka Judo Yudanshakai, Inc., California Judo, Inc., Visalia Unified School District, Mt. Whitney High School, and the Visalia YMCA 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., Chuka Judo Yudanshakai, Inc., California Judo, Inc., Visalia Unified School District, Mt. Whitney High School, and the Visalia YMCA 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. 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 506 V6.0.0, 090818

**CONSENT FOR AGE/WEIGHT CHANGE FOR ALL COMPETITORS
(ANYONE UNDER THE AGE OF 18 YEARS)**

We (I) herby express our (my) consent and approval that _____

PLEASE CHECK ONE:

_____ May not move into another division: Sign below

_____ May move into another division: Check one and sign below

Move up to a heavier weight division, but stay in the same age bracket. _____

Move up from his/her age bracket, but stay in the same weight division. _____

Signature of Parent/ Guardian _____ Date: _____

Signature of Parent/Guardian _____ Date: _____