

EDMONTON YUDANSHAKAI JUDO SOCIETY



Yellow to **Green** BELT Tournament

Saturday, February 21st, 2009

Hosted by EYJS Member Clubs
Dow Centennial Centre, Fort Saskatchewan, Alberta

Tournament setup & competitor organization time 9:00 AM
Competition Start Time:10:00AM

Tournament Director: Vice President EYJS or designated EYJS Tournament Director

Initial Contact information: Ph: 780 970 3669
Fax : 780 425 3675
Email : mhicks@healyford.com

Divisions : Determined exclusively by size and sex of the participants.

However, two distinct groupings are defined, " *Under 16*", and "*16 and over*" to ensure that physical variances evident with age, are not present in the competitors, and that competitors are of similar physical and mental development.

Weight classes: as above, no weigh-ins required. Athletes sized up at line-up.

Draws: format determined at the time of grouping of athletes. Options can include round robin, double round robin, or double knock out and is at the discretion of the tournament director and organizers the day of the tournament.

Signed waiver forms as per attached required for participation

Cost: \$5/person (PLEASE TRY TO BRING EXACT CHANGE) medals for 1st, 2nd, & 3rd
Please distribute to all interested participants!

We will see your competitors **and your volunteers** Saturday Feb 21st, 2009

All referees encouraged to attend. . .

Tournament sanctioned by Judo Alberta

WE REQUIRE YOU AND YOUR CLUB'S PARTICIPATION

An opportunity for volunteers to learn the rules of Judo and the mechanics of score keeping will also be part of this tournament date. Please attend this important date.

Edmonton Yudanshakai Judo Society February 21st, 2009

MINOR

NAME:.....CLUB.....

YEAR BORN.....

RELEASE, INDEMNITY, WARRANTY, REGISTRATION AND ASSUMPTION OF RISK

In consideration of the acceptance of the entry of _____ (hereinafter referred to as "the said child") to compete in and/or being permitted to participate in the EYJS monthly (hereinafter referred to as "This event"), I/we for myself/ourselves and for and behalf of the said child hereby release, remise, and forever discharge and agree to indemnify and save harmless the Alberta Kodokan Black Belt Association , the Edmonton Yudanshakai Judo Society, Tolide Judo Club, the Dow Centennial Center, and their respective organizers, officers, executives, directors, officials, agents, servants, and representatives (hereinafter referred to as "the releasees") from and against all claims, actions, costs, expenses, and demands in respect of death, injury, loss, or damage to the person or property of said child, or myself/ourselves, however caused, arising out of or in connection with the said child competing, or participating in this event and notwithstanding that the same may have been caused by, contributed to or occasioned by the negligence , breach of contract, breach of a common duty of care as an occupier of premises or otherwise, of or by the releases or any of them.

I/We agree to assume all risks, both known and unknown, and all consequences thereof, for myself/ourselves and for and on behalf of the said child, arising out of or in connection with said child competing or participating in this event.

I/we agree for myself/ourselves and for and on behalf of the said child to adhere to all rules, regulations and conditions of this event.

I/we hereby register the said child as a competitor or participant in this event and I/we certify that:

- 1 . The said child is in good physical condition and has no injury, disease or disability that would impair his or her performance or physical condition or increase the likelihood of injury in competing or participating in this event.
2. No physician, nurse, therapist trainer, coach, manager, or other person has advised me/us not to allow the said child to compete or participate in a body contact sport or in this event.
3. I/we am/are familiar with the sport of judo and the nature of a judo contest. I/we am/are aware that there is a risk of injury by the very nature of the sport.
4. We are the father and mother of the said child or the guardian(s) of the said child and the only person(s) lawfully entitled to act for and on behalf of the said child.

This document shall be binding upon the said child, myself/ourselves, the heirs, executors, administrators, assignees and personal representatives of each of us and the said child.

I/we have read this document and I/we agree that the said child and myself/ourselves are bound by its terms. I/we further understand that it is compulsory and mandatory that this document be fully completed and signed as a condition precedent to the said child competing or participating in this event.

DATE SIGNED

SIGNATURES _____ .
(PARENT/GUARDIAN/FATHER) (PARENT/GUARDIAN/MOTHER)

(PRINT NAME) (.PRINT NAME)

INSTRUCTIONS: This form is to be completed for all persons under the age of 18 years by the following person(s):

- a. both natural parents of the child if living together.
- b. both natural parents of the child if separated and no court order for custody has been granted.
- c. both natural parents of the child if divorced and a court grants joint custody.
- d. both the natural parent and the adopting parent of the child if married and if an adoption order has been granted.
- e. both adopting parents of the child if an adoption order has been granted.
- f. either the natural mother or natural father of the child if divorced or separated and being the parent who has sole custody of the child by court order.
- g. all guardians of the child whether appointed by court order or who are guardians by law.
- h. the natural mother of the child if the child is illegitimate and no court order has been granted giving custody to anyone else.

EDMONTON YUDANSHAKAI JUDO SOCIETY
ADULT(18 years and older) February 21st, 2009

NAME:.....CLUB.....

YEAR BORN.....

NOTICE: This is a legal document which must be properly completed and signed or your entry will not be accepted. PLEASE READ CAREFULLY. It affects your rights. If-you do not understand it, obtain legal advice before signing.

RELEASE, INDEMNITY, WARRANTY, AND -ASSUMPTION OF RISK

IN CONSIDERATION OF the acceptance of my entry to compete and/or my being permitted to participate in the EYJS Monthly (hereinafter referred to as "this event'), I hereby release, remise and forever discharge, and agree to indemnify and save harmless The Alberta Kodokan Black Belt Association, Edmonton Yudanshakai Judo Society, Tolide Judo Club, the Dow Centennial Center, the organizers of this event, their respective officers, executives, directors, officials, agents, servants and representatives (hereinafter referred to as " the Releasees") from and against all claims, actions, costs, expenses and demands in respect of death, injury, loss or damage to my person or property, however caused, arising out of or in connection with my competing or participating in this event and not withstanding that the same may have been caused by, contributed to or occasioned by the negligence, breach of contract, breach of common duty of care as an occupier of premises, or otherwise, of or by the Releasees or any of them.

I agree to assume all risks, both known and unknown, and all consequences thereof, arising out of or in connection with my competing or participating in this event. I agree to adhere to all rules, regulations and conditions of this event.

I CERTIFY THAT:

1. I am in good physical condition and I have no injury, disease or disability nor have I injected or ingested anything that would impair my performance or physical condition or increase the likelihood of injury in competing or participating in this event.
2. No physician, nurse, therapist, trainer, coach, manager or other person has advised me not to compete or participate in a body contact sport or this event.
3. I am familiar with the sport of Judo and the nature of a Judo contest. I am aware that there is a high risk of injury by the very nature of the sport.

THIS DOCUMENT SHALL BE BINDING UPON MYSELF, MY HEIRS, EXECUTORS, ADMINISTRATORS, ASSIGNS AND PERSONAL REPRESENTATIVES.

I have read this document and I understand it fully.

DATE: **SIGNED:**.....

PRINT NAME: