



# 13th Annual USJF National Kata Conference

**August 9–11, 2013 • Chicago, Illinois**

Sponsored by the USJF Kata Committee, Chicago Judo Black Belt Association and the Tohkon Judo Academy

The United States Judo Federation (USJF) Kata Development Committee and the Chicago Judo Black Belt Association proudly welcome the following nationally recognized kata experts and honored guests:

## Chief Clinician

**Eiko Shepherd, 7th dan**

USA International Coach  
USA World Master Level Instructor  
USA Kata Judge (National Class A – All 7 Kata)  
USJF Kata Chairperson – Kata Development  
National Youth Kata Coordinator  
Former Shiai Competitor  
Originally from the Kodokan, Tokyo, Japan

## Assistant Clinician

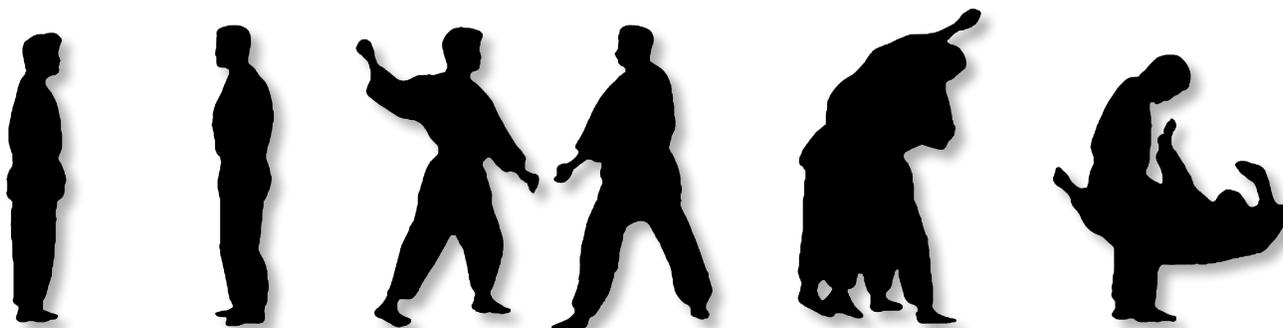
**Douglas Tono, 6th dan**

USA International Coach  
International Kata Competitor  
US Olympic Team Member  
US World Championship Team Member  
Dutch Open Gold Medalist (1st US Gold Medal ever in a European Championship)  
3 Time US Sr. National Champion  
US Sr. National Kata Champion  
World Masters Shiai and Kata Champion  
Class A Certified Kata Judge in Nage No Kata, Ju No Kata, Katame No Kata, Itsutsu No Kata  
Class B Certified Kata Judge in Kime No Kata

## Assistant Clinician

**Nicole Leung, 4th dan**

International Kata Competitor  
World Masters Kata Champion  
US Sr. National Kata Champion  
National Referee: N 1  
Class A Certified Kata Judge in Nage No Kata, Ju No Kata, Katame No Kata, Kime No Kata



# Conference Information

## Kata Conference Site

Tohkon Judo Academy  
4427 N. Clark St  
Chicago, IL 60640  
click for link to [Google Maps](#)

## Contact Information

Tohkon Dojo	773 784-7766	<a href="mailto:info@tohkon.com">info@tohkon.com</a>
Eiko Shepherd	618 781-5157	<a href="mailto:eikojudo1@gmail.com">eikojudo1@gmail.com</a>
Doug Tono	773 865-7268	<a href="mailto:dtjudo@tohkon.com">dtjudo@tohkon.com</a>

Free Parking available at Tohkon Judo Academy. Locker rooms and showers also available.

## Kata Conference Registration Fees

	Pre-Registration (by 7/18/2013)	After 7/18/2013
Three Day Conference	\$180	\$210
Two Day Conference	\$145	\$175
One Day Conference	\$80	\$95
Youth (ages 16 & under)	\$40 per day	\$55 per day

These prices include lunches during the clinics and Saturday evening BBQ @ Tohkon.

## Eligibility

Must be a current member of USJF, USA Judo or USJA. Must present card at registration.

## Hotel Information

Holiday Inn Chicago O'Hare  
5615 N. Cumberland Ave.  
Chicago, IL 60631  
847 763-3090  
click for link to [Google Maps](#)

USJF Kata Conference Rate - \$99 per night plus tax

Includes: Free Airport Shuttle, Free Parking, Free Internet

Reserve room by July 18, 2013 and refer to "Chicago Judo" to receive this special rate.

Call 800 465-4329 or 773 693-5800 to make your reservation.

You can also make your reservation by using the weblink [Chicago Judo](#)

Transportation to Kata Conference Site (the Tohkon Judo Academy) will be provided by Chicago Judo Black Belt Association.

# Conference Schedule

## Thursday – August 8, 2013

6:00pm – 7:00pm

Registration (at Hotel)

7:00pm – 9:00pm

Welcome / Cocktail Party

## Friday – August 9, 2013

7:15am

Bus Departs Hotel for Tohkon

8:00am – 9:00am

Registration (at Tohkon)

9:00am – 9:30am

Opening Ceremony

9:30am – 12:00pm

Ju No Kata

12:00pm – 1:30pm

Lunch Break – will be served at Tohkon; included  
with registration

1:30pm – 2:00pm

Judo Injuries / Prevention Dr. Tony Zemlinsky

2:15pm – 4:30pm

Kime No Kata

5:30pm

Bus Departs Tohkon for Hotel

## Saturday – August 10, 2013

7:45am

Bus Departs Hotel for Tohkon

8:30am – 9:00am

Registration (at Tohkon)

9:00am – 12:00pm

Nage No Kata / Goshin Jutsu

12:00pm – 1:30pm

Lunch Break – will be served at Tohkon; included  
with registration

1:30pm – 2:00pm

Rejuvenation Practice

2:00pm – 4:30pm

Katame No Kata

6:00pm – ???

Certification Test

??? – 9:00pm

BBQ Dinner Buffet @ Tohkon; included  
with registration)

9:00pm

Bus Departs Tohkon for Hotel

## Sunday – August 11, 2013

7:45am

Bus Departs Hotel for Tohkon

8:30am – 9:00am

Registration (at Tohkon)

9:00am – 12:00pm

Koshiki No Kata

12:00pm – 1:30pm

Lunch Break – will be served at Tohkon; included  
with registration

1:30pm – 4:00pm

Itsutsu No Kata

4:00 pm – 4:30pm

Closing Ceremony

5:30pm

Bus Departs Tohkon for Hotel

*(Schedule of Events is tentative and subject to change)*

United States Judo Federation Sanction #13-08-08

## Official Registration Form

**To qualify for Pre-Registration, form and payment must be received by July 18, 2013. DO NOT mail after July 14, 2013.**

Please provide all requested information. **The waiver must be signed by the competitor/guardian in order to participate.**  
Registration fee must accompany this application.

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ E-mail \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Dojo \_\_\_\_\_ Sensei \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Sex \_\_\_\_\_ Belt Color/Rank \_\_\_\_\_

NATIONAL CARD: USJF, USA Judo, USJA (*circle one*) CARD # \_\_\_\_\_ Exp. Date \_\_\_\_\_

**A valid card must be presented at registration for competitor to be allowed to participate.**

If assistance/accommodation is needed (check appropriate):  Vision Loss/Blindness  Hearing Loss/Deafness  
Type of assistance/accommodation requested or name of person assisting: \_\_\_\_\_

Your Cell Phone Number \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Phone Number \_\_\_\_\_

*Please check the appropriate boxes.*

	Pre-Registration (by 7/18/2013)	After 7/18/2013
<input type="checkbox"/> Three Day Conference	\$180	\$210
<input type="checkbox"/> Two Day Conference (check days attending)	\$145	\$175
<input type="checkbox"/> Friday <input type="checkbox"/> Saturday <input type="checkbox"/> Sunday		
<input type="checkbox"/> One Day Conference (check day attending)	\$80	\$95
<input type="checkbox"/> Friday <input type="checkbox"/> Saturday <input type="checkbox"/> Sunday		
<input type="checkbox"/> Youth –ages 16 & under (check days attending)	\$40 per day	\$55 per day
<input type="checkbox"/> Friday <input type="checkbox"/> Saturday <input type="checkbox"/> Sunday		
<input type="checkbox"/> I will be attending the Thursday Welcome / Cocktail Party		

Send registrations to:

USJF Kata Conference, Tohkon Judo Academy, 4427 N. Clark St., Chicago, IL 60640.

Make checks payable to:

Tohkon Judo Academy, Inc.

**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., Chicago Judo Black Belt Association, Illinois Judo, Inc., Tohkon Judo Academy, Inc., State of Illinois, City of Chicago, and the Japanese American Service Committee**, 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., Chicago Judo Black Belt Association, Illinois Judo, Inc., Tohkon Judo Academy, Inc., State of Illinois, City of Chicago, and the Japanese American Service Committee**, 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