



USJF Sanction #02-07-01  
CJI Sanction #26-02

# United States Judo Federation

**PRESENTS**

## Junior and Youth Development Clinic

*Featuring*

**The 2001 USJF World Team Members**

**Sayaka Matsumoto (48kg)  
Grace Jividen-Chapman (63kg)  
Amy Tong (78kg) & Neal Takamoto (Open)**

**Date: Monday, July 8, 2002**

**Time: 9:00am – 5:00pm**

**Location: The Hyatt Regency Hotel – Sacramento  
1209 L Street  
Sacramento, CA 95814**

***ALL AGES ARE WELCOME!***

Come meet and learn from our USJF 2001 World Team Members! Sayaka, Amy, Grace and Neal will be sharing the techniques and training methods that have made them so successful. These four individuals are fantastic role models. Coaches, athletes and officials are welcome to participate in this event.

The clinic fee is \$50.00 (*includes lunch*) and **must be postmarked** by July 1, 2002. Postmarked after July 1, 2002, the clinic fee is \$60.00. A valid USJF, USJI or USJA card must be presented at time of registration.

Please mail the entry form, waiver and fees to: Joyce Makimoto, 43 Windubey Circle, Sacramento, CA 95831. For more information, contact Teri Takemori at silver92@albany.net or (518) 399-3936.



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**PRESENTS**

**2001 USJF World Team Members Clinic**  
*Featuring*  
**Sayaka Matsumoto (48kg),  
Grace Jividen-Chapman (63kg),  
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## Official Entry Form

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**9:00am – 5:00pm**  
**The Hyatt Regency Hotel – Sacramento**  
**1209 L Street**  
**Sacramento, CA 95814**

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**Mail Entry, Waiver & Fee to:**

Joyce Makimoto  
43 Windubey Circle  
Sacramento, CA 95831

**Entry Form Due Date:** July 1, 2002

**Clinic Fee:** \$ 50 (*includes lunch*)  
**Late Fee:** \$ 60  
**Make Checks Payable to:** USJF

For more information contact: Teri Takemori - silver92@albany.net or (518) 399-3936

**(PLEASE PRINT)**

Participants Name:

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Work Phone Number: \_\_\_\_\_

Email Address \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Birth Date (mm/dd/yy) \_\_\_\_\_ Age \_\_\_\_\_ Sex (circle one) M F

USJF/USJI/USJA # \_\_\_\_\_ Exp Date: \_\_\_\_\_ Judo Rank: \_\_\_\_\_

Dojo Name \_\_\_\_\_

Address \_\_\_\_\_

Instructor \_\_\_\_\_

**For Official Use Only:**

Date Rec'd \_\_\_\_\_ Paid by: Check \_\_\_\_\_ Cash \_\_\_\_\_ Initials \_\_\_\_\_

**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 2002 USJF Judo Clinic, in any Judo tournament, practice, clinic, and related events and activities of the United States Judo Federation, United States Judo Inc., United States Judo Association, California Judo Inc., Daiheigen Judo Yudanshakai, The Hyatt Regency Hotel Sacramento, and the City of Sacramento, CA, 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 conditions 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, 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, permanent disability, or death.
5. Release, waive, discharge and covenant not to sue the United States Judo Federation, United States Judo Inc., United States Judo Association, California Judo Inc., Daiheigen Judo Yudanshakai, The Hyatt Regency Hotel Sacramento, and the City of Sacramento, CA, 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, 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 "releasee", from any and 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 in part by the negligence of the releasee or otherwise to the fullest extent permitted by law.

**I HAVE READ THE ABOVE WARNING, WAIVER, AND RELEASE, UNDERSTAND THAT I GIVE UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND KNOWING THIS, SIGN IT VOLUNTARILY. 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/GUARDIAN AS EVIDENCED BY THEIR SIGNATURE BELOW.**

\_\_\_\_\_  
Participant

\_\_\_\_\_  
Participant's Signature

\_\_\_\_\_  
Date

**FOR PARENTS/GUARDIANS OF PARTICIPANTS OF MINORITY AGE  
(UNDER AGE 18 AT TIME OF REGISTRATION)**

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 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 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/Guardian

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Date