

2023 Inland Empire Judo Classic

USJF Sanction: 23-05-04

| | |
|-----------------------------|--|
| Tournament Director: | Leigh Yamada |
| Head Referee: | Patrick Lo |
| Tournament Date: | Saturday, May 27, 2023 Referee/Coaches meeting: 8:30 am, Competition Starts: 9:30 am NEW: We will run one mat with Seniors at the start of the tournament. |
| Tournament Site: | Spokane Convention Center, 334 W Spokane Falls Blvd |
| Tournament Type: | Modified Double Elimination, Round Robin for 5 or less. |
| Eligibility: | Must have current USJF or USJA Membership. All current USA Judo members may purchase USJF membership for \$35 through July 2023 at usjf.com |
| Registration Info: | Entry Fee \$40 + \$2.00 handling fee, Second entry \$20. http://2023-inland-empire-classic.square.site/ Online registration and payment by Tuesday, May 23 rd . https://bit.ly/InlandEmpire2023 No late registration will be accepted after May 23 rd . |
| Weigh In: | Between May 22-23, each dojo will weigh in their own competitors and email a roster with official weights to pacificjudoacademy@comcast.net by midnight May 23 rd . |

IJF rules with the following modifications:

1. Shime-waza rule: Shime-waza allowed for 13 years and older only.
2. Kansetsu-waza rule: Kansetsu-waza allowed in Brown & Black and Masters only.
3. Blue & White judo gi are required for all senior divisions. Optional for Juniors but encouraged. **Each competitor must supply their own white and blue obi.**
4. Current IJF medical rules apply to all divisions.
5. There may be co-ed competition for males & females 10 years of age and under depending upon the number of entries.
6. If a player moves up a division by their own choice, they will be subjected to the rules of that division. If player is under 18 and under Shodan, parent/coach signature is required to move up a division.
7. Weight divisions may be modified at the tournament director's discretion for the safety of the participants. (Permission for players under the age of 18 will be given through parent/guardian signature on the registration/waiver. Permission for non-blackbelt players will be given through black belt signature on the "Certificate Regarding Non-Blackbelt Contestants.")

Accommodation: Doubletree by Hilton Spokane City Center
\$135.00 Double Occupancy, includes complimentary parking
Book by May 19, 2023 **1-800-757-6131** or **1-509-744-2363**
<https://www.hilton.com/en/attend-my-event/inlandempirejudoclassic/>

Junior Novice division is Yellow and below and will be created based on entries.

| All divisions will be light, medium, heavy | Match Time | Golden Score | Rest Period | Blue Gi | Shime Waza | Kansetsu Waza |
|---|-------------------|---------------------|--------------------|----------------|-------------------|----------------------|
| Junior M/F 5-6 Novice | 3 min | 2 min | 3 min | NO | NO | NO |
| Junior M/F 5-6 | 3 min | 2 min | 3 min | NO | NO | NO |
| Junior M/F 7-8 Novice | 3 min | 2 min | 3 min | NO | NO | NO |
| Junior M/F 7-8 | 3 min | 2 min | 3 min | NO | NO | NO |
| Junior M/F 9-10 Novice | 3 min | 2 min | 3 min | NO | NO | NO |
| Junior M/F 9-10 | 3 min | 2 min | 3 min | NO | NO | NO |
| Junior M/F 11-12 | 3 min | 2 min | 3 min | NO | NO | NO |
| Junior M/F 13-14 | 3 min | Unlimited | 3 min | NO | YES | NO |
| Junior M/F 15-16 | 3 min | Unlimited | 3 min | NO | YES | NO |
| Senior M/F Novice | 4 min | Unlimited | 4 min | YES | YES | NO |
| Senior M/F Brown/Black | 4 min | Unlimited | 4 min | YES | YES | YES |
| Masters M/F (35+) | 3 min | Unlimited | 3 min | YES | YES | YES |

Step 1 - Registration:



Step 2 – Payment:



2023 Inland Empire Judo Classic

USJF Sanction: # 23-05-04

Name _____
(Please print)

Address _____

Phone () _____ Email _____

Date of Birth _____ Age _____ Gender _____

Weight _____ lbs Division _____ Rank/Belt Color _____

Membership Card # _____ Expiration _____ Affiliation _____

Judo Club _____ Instructor _____

Second Entry

Division _____

Instructor's Signature

Parent/Guardian Signature

CERTIFICATE REGARDING NON-BLACK BELT CONTESTANTS

I, _____, a Judo instructor, who has been awarded the Judo rank of Shodan or higher, recognized by a National Judo Federation, hereby certify that _____ although not having been awarded the Judo rank of Shodan or higher, is of sufficient aptitude and skill in Judo to compete in this tournament.

Signature of Black Belt Judo Instructor

Date

If assistance/accommodation is needed (please check off appropriate category):

Vision Loss/Blindness

Hearing Loss/Deafness

Type of assistance/accommodation requested or name of person assisting:

WARNING!

WAIVER AND RELEASE OF LIABILITY AND AGREEMENT TO PARTICIPATE

(Including Limited Co-Ed Competition for Age 10 and Under for USJF Sanction)

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., Northwest Judo Yudanshakai, Inc., Pacific Judo Academy, Spokane Convention Center**, and the officers, employees, volunteers, and agents, 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, including United States Judo Federation, 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 (Releasees), 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., Northwest Judo Yudanshakai, Inc., Pacific Judo Academy, and the Spokane Convention Center**, 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. CONSISTENT WITH THE BY-LAWS OF USJF, THIS TOURNAMENT MAY INCLUDE CO-ED COMPETITION FOR AGES 10 AND UNDER IN COMPARABLE AGE/WEIGHT DIVISIONS WHERE THERE IS AN INSUFFICIENT NUMBER OF GIRLS FOR NON-CO-ED AGE/WEIGHT DIVISIONS. I HAVE READ AND UNDERSTAND THE TOURNAMENT ANNOUNCEMENT CONCERNING THESE SPECIAL DIVISIONS. 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



UNITED STATES JUDO FEDERATION

Medical Committee

Mailing Address: Telephone:

PO Box 338

(541) 889-8753

FAX:

(541) 889-5836

Internet:

www.usjf.com

Ontario, OR 97914-0338

USJF Medical Committee - COVID Update 10/2022

Effective immediately, the following shall apply to all USJF Dojos and all USJF events, local and national:

Testing:

1. USJF events will follow jurisdictional COVID-19 guidelines provided by the local/state health department and/or appropriate government entities
2. COVID testing is not a requirement from the USJF national office
3. Testing *may* be required at the discretion of the event medical director, depending on local conditions
4. International competitors from outside the United States will need to follow COVID-19 Testing and other protocols as required by the US State Department/CDC.

Vaccinations:

1. There is no COVID-19 vaccine requirement for athletes, referees, staff, vendors, or spectators. However, COVID-19 vaccines are highly encouraged.

Masking:

1. Masking should follow local/state health department guidelines
2. There is no masking requirement from the USJF national office

Symptom Screening:

1. Symptoms screening, visitor logs, or temperature checks are not required
2. Symptom screening *may* be performed at the discretion of the head sensei, or event medical director
3. Individuals actively experiencing symptoms including fever, cough, sore throat, and fatigue should not practice/participate

Hygiene:

1. Continue to sanitize/wash hands frequently
2. Clean mats and equipment regularly

Returning to Activity after COVID Infection:

1. Members who were asymptomatic or had mild symptoms may return to activity on a gradual basis after an appropriate period of isolation. Please visit the CDC website for isolation guidelines:
<https://www.cdc.gov/coronavirus/2019-ncov/your-health/isolation.html> [cdc.gov]
2. Members who require hospitalization or experience new or prolonged cardiopulmonary symptoms should consult with their personal physician BEFORE returning to activity
3. If you have any questions or concerns, please consult your personal physician