

OFFICIAL ENTRY FORM

GRANTS PASS JUDO CLUB/RIVER CITY MARTIAL ARTS

(PLEASE PRINT)

Last Name		First	Mi
Address		City	State Zip
Age	Weight	(circle sex) M F	
Home Phone#	Name Emergency Contact		Phone #
Rank	Club Name		
USJA Card #	USJF Card #	USA CARD #	Other

IF MINOR (UNDER 18 YEARS OF AGE) MUST HAVE PARENT/GUARDIAN CONSENT

Print Name (Parent/Guardian)	Signed (Parent/Guardian)	Date
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Name	Rank
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REQUIRED: NON BLACK BELT COMPETEITORS IN BLACK BELT POOLS: I certify that the above named contestant, though not having been awarded the rank of Shodan, is of sufficient aptitude and skill in Judo to compete in matches with Shodan (or higher) under Black Belt Rules

Instructors Signature	Print Name of Judo Instructor	Rank
Instructors Rank By: (circle one)	USJA	USJF USA