2012 CORVALLIS JUDO FALL TOURNAMENT SATURDAY November 10, 2012 DIXON RECREATION CENTER Oregon State University Campus 26th and Washington, Corvallis, OR

THANK YOU FOR YOUR SUPPORT!!!!!!

Contestant's name:			
Last	First	Middle	
Address	City	State	
Club name:			
Age: Sex: _	Weight:	Birth date:	
Rank:USJA	A/USJF/USJI card #:	Expiration Date:	
Email address:			-
CERTIFICA	TE REGARDING NON	N-BLACK BELT CONTESTA	NTS
I.		. a Judo instructor	who has been
awarded the rank of Sho	dan or higher, under the a	, a Judo instructor auspices of the USJF, USJA, or U	JSJI, hereby
		, although not having been av	
rank of Shodan or higher	r is of sufficient aptitude a	and skill in Judo to compete in th	is tournament
Contestant's Signature	:	Dat	te:
Sensei's Signature		Dat	te•