

OFFICIAL ENTRY FORM
Grants Pass Judo Club* River City Martial Arts
(Please Print)

| | | |
|-----------|-------|----|
| Last name | First | MI |
|-----------|-------|----|

| | | | |
|---------|------|-------|-----|
| Address | City | State | Zip |
|---------|------|-------|-----|

| | | | | |
|-----|--------|----------|------|--------|
| Age | Weight | (circle) | Male | Female |
|-----|--------|----------|------|--------|

| | | |
|------------|---------------------------|-------|
| Home phone | Name of Emergency Contact | Phone |
|------------|---------------------------|-------|

| | |
|------|-----------|
| Rank | Club Name |
|------|-----------|

| | | | |
|-------------|-------------|-------------|-------|
| USJA Card # | USJF Card # | USJI Card # | Other |
|-------------|-------------|-------------|-------|

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

| | | |
|------------------------------|--------------------------|------|
| Print Name (Parent/Guardian) | Signed (Parent/Guardian) | Date |
|------------------------------|--------------------------|------|

| | |
|------|------|
| Name | Rank |
|------|------|

Required: NON BLACK BELT COMPETITORS IN BLACK BELT POOLS: I certify that the above contestant, though not having been awarded the rank of Shodan, is sufficient aptitude and skill on Judo to compete in the matches with Shodan (or higher) under Black Belt Rules.

| | | |
|-----------------------|-------------------------------|------|
| Instructors signature | Print name of Judo Instructor | Rank |
|-----------------------|-------------------------------|------|

Instructors Rank by: (circle one)

USJA USJF USJI