

# FUND RAISING NEWAZA CLINIC: GOING FOR GOLD AT THE WORLD JUJITSU CHAMPIONSHIPS! With Taylan Yuasa

Budokan Dojo and the Japanese Cultural and Community Center of Washington are hosts to a special Funding Raising Newaza Clinic with Taylan Yuasa. This clinic is sanctioned by the United States Judo Federation. All collected donations will go toward assisting Taylan fund Sensei Bert Mackey attend the event as his coach.

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Sanction Number: TBD

Date: Friday – May 17, 2019

Place: Japanese Cultural and Community Center of Washington

**Budokan Dojo** 

1414 South Weller Street Seattle, Washington 98144

Check In: 6:00 to 6:30PM – Session 1 - Friday, May 17, 2019

7:30 to 8:00PM - Session 2 - Friday, May 17, 2019

Clinic Schedule: 6:30 to 8:00PM – Session 1 (Youth and Adult Beginners)

8:00 to 9:30PM - Session 2 (Advanced)

Suggested Donation: \$25.00 (U.S. funds) per person (Cash, Check, Credit)

Participants must present current USJF, USJI, USJA or Judo Canada cards.

All contestants must present current USJF, USJI, USJA or Judo Canada cards to participate. Each clinic participant must have all properly completed Waiver and Entry Forms required for this clinic.

Included in this information package are two (2) forms per judoka, one Entry Form and one Waiver.

For further information contact Dojo staff at budokanseattle@gmail.com



## **OFFICIAL ENTRY FORM**

# Newaza Clinic with Taylan Yuasa Sanctioned by United States Judo Federation May 17, 2019

## (PLEASE TYPE OR PRINT)

NAME:		_ AGE:	SEX: Male	Female			
ADDRESS:	Cit	y:	State:	Zip:			
PHONE#: (	)EM	AIL:		-			
BIRTH DATE: _	AG	E:					
	If assistance/accommo □Vision Loss/ Bli Type of assistance/accon	ndness 🗆 He	earing Loss/ Deafne	ess			
RANK: (Please Check One)							
Junior Ranks:  White Yellow Orange Green Blue Purple		Sen	ior Ranks: White Green Blue Brown Black Belt Rank: _	Dan			
	YOU MUST PRESENT ONE OF THESE CARDS AT REGISTRATION						
	USJF#expire USJA‡	sUSJI# #expire:					
JUDO CLUB	Inst	ructor	Phone (	)			

Hand Carry Entries to Budokan Dojo on Clinic Day

Budokan Dojo 1414 South Weller Street Seattle, WA 98144

#### 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, in any Judo tournament, practice, clinic, and related events and activities ("Activity") of the United States Judo Federation, Inc., USA Judo/United States Judo, Inc., United States Judo Association, Inc., Northwest Judo Yudanshakai, Inc., Budokan Dojo, Japanese Cultural and Community Center of Washington, 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, 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., USA Judo/United States Judo, Inc., United States Judo Association, Inc., Northwest Judo Yudanshakai, Inc., Budokan Dojo, Japanese Cultural and Community Center of Washington, and the officers, employees, volunteers, and agents, 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. 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 EORCE AND FEFECT

	T EXTENT ALLOWED BY LAW AND AGREE TO BE INVALID THAT THE BALANCE, NO ND EFFECT.		
Participant	Participant's Signature	Date	
	GAL GUARDIANS OF PARTICIPANTS OF MI IDER AGE 18 AT TIME OF REGISTRATION)	INORITY AGE	
release, as provided above, of all the indemnify and hold harmless the R participation including litigation expeminor child's participation in these p	Il guardian with legal responsibility for this participal Releasees, and, for myself, my heirs, assigns, and releasees from any and all liabilities incident to menses, attorney fees, loss, liability, damage or costs we rograms as provided above, even if arising from the eminor participant as to the above warnings and con	next of kin, I release and agree to my minor child's involvement on which may incur as the result of the cir negligence, to the fullest exten	
Parent/Legal Guardian	Parent/Legal Guardian's Signature	Date Form 506 V6.0.0, 090818	