16th Annual Red, White, and Blue Classic JUDO TOURNAMENT



Saturday November 10, 2018 Grant County YMCA STAR Financial Coliseum 123 Sutter Way Marion, IN 46952

Opening Ceremonies at 11:15

NOTICE!

The 2018 Red, White, and Blue Classic Tournament will be a test site for Developmental, Local and Regional Referee Certification Contact Tournament Director prior to November 3, 2018 to be considered for testing.

16th Annual Red, White, and Blue Classic

Saturday, November 10, 2018

Grant County Family YMCA, STAR Financial Coliseum, 123 Sutter Way, Marion, IN 46952 USJA Sanction:

Eligibility:	JUNIOR, SENIOR, and MASTERS DIVISIONS: Competitors MUST present a						
	Current USA Judo, USJA or USJF, ATJA, or AJJF Card						
Awards:	1 st , 2 nd , and 3 rd Place Medals for Each Division.						
	1 st , 2 nd , and 3 rd Place Team Trophies (Junior Team only)						
Entry Fee:	Advanced Registration must be postmarked by November 8 th						
Make Checks out to:	Advanced: \$30.00 1 st Division / \$15.00 each additional Division						
Marion PAL Judo	Mail Advance Entries to:						
Wallon I AL Judo	Marion PAL Judo c/o Bruce Bender 4411 N. Macombe Dr. Marion, IN 46952						
	Event Day: \$40.00 1 st Division / \$25.00 each additional Division						
	A SEPARATE ENTRY FORM MUST BE COMPLETED FOR EACH DIVISION						
Registration & Weigh-Ins:	9:00 AM – 10:30 AM Saturday, November 10, 2018 at						
	Grant County Family YMCA. 123 Sutter Way. Marion, IN. 46952						
Start Time:	Opening Ceremonies begin at 11:15 am with Masters and Junior Competition to						
	follow. Senior divisions will begin immediately following Junior Competition.						
	Newaza at the conclusion of the Senior division.						
Rules:	Double Elimination						
	I.J.F. Contest Rules as modified by USA Judo:						
**Footwear must be worn	 Kansetsu Waza allowed in Brown/Black Belt Division only 						
while off the mat!**	 Shime Waza allowed for 13 Years of age and Older 						
	• ALL PLAYERS MUST HAVE THEIR OWN WHITE AND BLUE BELTS						
Match Times:	3 Minute Matches – All Junior Divisions, Masters, and all Newaza.						
	4 Minute Matches All Senior Divisions						
Tournament Co-Directors:	Bruce Bender and Robyn Culley Head Referee: Gary Amick						
	(765) 667-2976 (cell) robyncculley@gmail.com						
	bbender@indy.rr.com						
Concessions:	Available at Tournament Site						

DIVISIONS

The Tournament Director reserves the right to make any changes that are in the best interest of the Contestants and to achieve fairness and competition.

Indian Marria	Ages	7-8	
Junior Novice		9-10	
Boys & Girls		11-12	All Junior, Masters, and Newaza
White / Yellow Belt Only May also compete All Ranks		13-14	Divisions
May also compete All Kanks		15-16	Light / Middle / Heavy
	Ages	6 & Under*	
Junior All Ranks		7-8	Senior Men's Novice
Boys and Girls		9-10	Light / Middle / Heavy
		11-12	
*There is no Novice division for 6 & Under.		13-14	Senior Men Brown/Black
		15-16	Light / Middle / Light Heavy/ Heavy
Senior Women	Novice & Advanced		
Senior Men	Novice & Brown/Black		Senior Women's
Men's Masters All Ranks	Ages	30-39, 40+	Novice Light / Middle / Heavy
	_		Advanced Light / Middle / Heavy
Male and Female Newaza	All Ran	ks	

Official Use Only	/ – Amount Paid: \$
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2018 Red White and Blue Classic Entry Form

Advanced: \$30.00 first divis	sion / \$15.00 ad	ditional divisio	n. Ever	nt Day: \$40.	00 first	division / \$25	.00 additiona	l division.
Contestant:				CLUB: _				
DOB:	_ Age:	Sex:	Male	Female	Belt	Color:		
Advanced entry REQU	Advanced entry REQUIRED: E-mail:					or Pho	one:	
Membership – Contesta proof of application of metournament site				•		•		
USA Judo / USJA / US	JF / ATJA / AJ	JF#:		Expiration Date				
Approved:								
	ONE F	ORM	PE	R DI	VIS	SION		
		To be comp	leted b	y Tournan	nent o	<i>fficial</i> – Wei	ght:	Ibs
Junior Divisions (Circl	e ONE)							
Boys - Novice (v	vhite/yellow)		7-8	9-	10	11-12	13-14	15-16
Boys – All Rank		6 & Under	7-8	9-	10	11-12	13-14	15-16
Girls – Novice (w	hite/yellow)		7-8	3 9-	10	11-12	13-14	15-16
Girls – All Rank		6 & Under	7-8	3 9-	10	11-12	13-14	15-16
Senior Divisions (Circ	le ONE)							
Senior Men	White-Gr	een	Brown	/ Black				
Senior Women	White-Gr	een	Brown	/ Black				
Men Masters	30-39	40+						
Newaza	Male	Female	е					
CE	RTIFICATE R	EGARDING	NON-B	BLACK BE	LT CC	NTESTANT	<u>'S</u>	
				a luda laa	tructor	. who has he	oo owardaa	l the lude
I,rank of Shodan or higher	r by USA Judo	, USJA, USJ	, IF, ATJ <i>i</i>	A, or AJJF	hereb	, who has be y, certify that	the above-r	named
contestant is of sufficient	t aptitude and	skill in Judo t	to comp	ete in this	tourna	ment in this	Division.	
Cianatura of Juda Instru	nto r				Doto			_
Signature of Judo Instruc	JUI				Date			
*CONSENT	FOR WEIGH	Γand/or AG	E CHA	NGE – Mu	st Cho	eck ONE Bo	x and Sign	
□ I hereby express or		• •					•	ner move
up into another weig ☐ I hereby express or								ner move
up into another weight								ici illove
Coach signature to	verify review o	f bracket and	d appro	val:				
☐ I do not give conser	nt nor approve	moving up ir	nto a hi	gher weigh	t or ag	je bracket.		
Signature of Adult Conte	stant	Date	-	Signature o	of Mind	or's Parent/G	Guardian	Date

Warning, Waiver, and Release of Liability must be signed on the BACK

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, the 2018 Red, White, and Blue Classic Judo Tournament and related events and activities of the United States Judo Association (USJA), Indiana Judo, Inc., Marion PAL Club Judo, United States Judo, Inc. (USA Judo), United States Judo Federation (USJF), American Traditional Jujutsu Association – Judo Division (ATJA), American Judo & Jujitsu Federation (AJJF) and Grant County Family YMCA.

- 1. Acknowledge that I am familiar with the sport of Judo and understand the Judo rules governing the sport of Judo.
- 2. Agree 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. Acknowledge and fully understand that I will be engaging in a contact sport that might result in serious injury, including permanent disability or death, and sever social and economic losses due to not only my own actions, inactions or negligence, but also to the action, inactions or negligence of others, the rules of the sport of Judo, or conditions of the premises or 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, permanent disability, or death.
- 5. Release, waive, discharge and covenant not to sue the USJA, USJF, AJJF, ATJA, Indiana Judo Inc., Marion PAL Club Judo, USA Judo, Grant County Family YMCA, together with their affiliated clubs, their respective administrators, directors, agents, coaches and other employees or volunteers of the organization, event officials, medical personnel, other participants, their parents, guardians, supervisors and coaches, sponsoring agencies, sponsors, advertisers, and if applicable owners, lessors, and lessees of premises used to conduct the even, all of whom are hereinafter referred to as "Releasee," from any and all claims, demands, losses, or damages on account of injury, including permanent disability and death and damage to property caused or alleged to be caused in whole or in part by the negligence of the releasee or otherwise to the fullest extend permitted by law.

I HAVE READ THE ABOVE WARNING, WAIVER, AND RELEASE, UNDERSTAND THAT I GIVE 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 RISK 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/GUARDIAN AS EVIDENCE 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. FOR PARTICIPANTS AGE 18 AND OLDER Print Name of Participant Signature Date FOR PARENTS / GUARDIANS OF PARTICIPANTS UNDER AGE 18 ON DAY OF EVENT This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all 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 in these programs as provided above, even if arising from their negligence, to the fullest extend permitted by law. I have instructed the minor participant as to the above warnings and conditions and their ramifications. Print Name of Parent/Guardian Signature Date