PRESENTS THE

NORTH COAST CHAMPIONSHIPS

Saturday March 21, 2020
Tournament starts @ 10 a.m.

Church on the North Coast Gym
4125 Leavitt Rd.
Lorain, Ohio 44053

Featuring
Junior Competition & Senior Competition
Master Competition & Kata Competition

Medals will be awarded for 1st, 2nd, & 3rd
For Shiai and Kata competition

Fees

- Pre-registration - Individual $55.00
- Day of event - Individual $65.00
- Pre-registration - Kata Pairs $65.00
- Day of event - Kata Pairs $75.00
- Spectators Free
NORTHCOAST CHAMPIONSHIPS

DATE: Saturday, March 21st, 2020

LOCATION: Church on the North Coast Auditorium
4125 Leavitt Rd.
Lorain, Ohio 44053

SANCTION: USA Judo #

ELIGIBILITY: All contestants must provide a valid U.S.J.F.,
must have the proper ID from their home country.

NOTE: Membership registration available at the site.

SCORING: Double Elimination (4 or more in a division)
Round Robin (3 or less in a division)

MATCH TIMES: Sr. Men & Women Black & Brown Division 4 min.
all other Divisions 3 min.

RULES: The current rules of the International Judo
Federation (IJF) as modified.
1. GOLDEN SCORE will apply to ALL DIVISIONS.
2. NO Kansetsu waza allowed in Junior Division
3. Shime waza allowed for 13 yrs. of age and up
4. Kansetsu waza allowed in all senior divisions
   regardless of age. (min. age for Sr. div. is 13)
5. 2002 Medical Rules
6. Must be in Judo Gi to receive your Award

    Kata: Nage No Kata, Katame No Kata, Mixed (coed) teams OK.

Junior Boys:

<table>
<thead>
<tr>
<th>Age</th>
<th>Light Middle and Heavy</th>
<th>7/8  Light Middle and Heavy 9/10 Light Middle and Heavy 11/12 Light Middle and Heavy 15/16 Light Middle and Heavy</th>
</tr>
</thead>
<tbody>
<tr>
<td>6&amp;Und</td>
<td>Light</td>
<td>13/14 Light Middle and Heavy</td>
</tr>
<tr>
<td>9/10</td>
<td>Light</td>
<td></td>
</tr>
<tr>
<td>13/14</td>
<td>Light</td>
<td></td>
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</tbody>
</table>

Junior Girls:

<table>
<thead>
<tr>
<th>Age</th>
<th>Light and Heavy</th>
<th>7/8  Light and Heavy 9/10 Light and Heavy 11/12 Light and Heavy 15/16 Light and Heavy</th>
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<td></td>
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<td>13/14</td>
<td>Light</td>
<td></td>
</tr>
</tbody>
</table>

Masters: 30-39 Years and older Light, Medium, Heavy
40 + Years and older Light, Medium, Heavy

Senior Men: White & Green, Brown Belt, Black Belt
(Brown Belt may enter Black Belt Div.)
Light Middle and Heavy

Senior Women: White & Green, Brown & Black Belts
Light Middle and Heavy
AWARDS: Individual Competition - Medals 1st, 2nd, & 3rd
Kata Competition - Medals for 1st and 2nd place team

ENTRY FEES: Pre-Registration by March 16, 2020

1. Same person entering more than one division
   1st division $55. Each additional is $30.

   Kata Teams
   1st Kata $65, additional Kata’s $30

Registration at Tournament Site
1. Same person entering more than one division
   1st division $65. Each additional is $40.

   Kata Teams 1st Kata $75, additional Kata’s $40

*Weigh-in’s available Friday after Mat set up!!!*

SATURDAY’S REGISTRATION AND WEIGH IN DEADLINES:

<table>
<thead>
<tr>
<th>Division</th>
<th>Registration/Weigh in</th>
<th>Compete</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jr.’s 6-10 &amp; Kata</td>
<td>8:00 - 9:00 a.m.</td>
<td>10:00 a.m.</td>
</tr>
<tr>
<td>Jr.’s 11-16</td>
<td>9:00 - 10:00 a.m.</td>
<td>11:00 a.m.</td>
</tr>
<tr>
<td>Master</td>
<td>10:00 - 11:00 a.m.</td>
<td>12:00 p.m.</td>
</tr>
<tr>
<td>Seniors</td>
<td>11:00 - 12:00 p.m.</td>
<td>1:00 p.m.</td>
</tr>
</tbody>
</table>

TOURNAMENT DIRECTOR: Paul Jordan  Lorey Edwards
1384 Lear Industrial Parkway
Avon, Ohio 44011
(440) 218.6972

E-Mail: cttbrasa@yahoo.com judolorey@aol.com

HEAD REFEREE: TBA
KATA JUDGES: TBA
REFEREE MEETING: 9:00 - 9:45 a.m.

The tournament directors reserve the right to make adjustments, as they deem necessary in the best interest of the contestants. Their decisions and that of the Head Referee are final.
Church on the North Coast Gym
4125 Leavitt Rd. Lorain (Rt. 58)
OFFICIAL WEIGHT_______

NORTHCOAST CHAMPIONSHIPS

Official Entry Form (PLEASE PRINT)

Send Pre-registration forms and entry fees made payable to Chu To Bu/Brasa Judo, Jiu Jitsu
1384 Lear Industrial Parkway, Avon, Oh., 44011

CONTESTANT'S

MALE (    ) NAME: ________________________________________SEX: FEMALE(    )

last first

ADDRESS: ____________________________ PHONE: (     ) __________

CITY: ____________________________ STATE: __________ ZIP: ______

AGE: ______ DATE OF BIRTH: __________ CLUB: __________________

CURRENT USJF,USJI,USJA,A.T.J.A. (circle one) REGISTRATION # ________

EXPIRATION DATE: ________

FOREIGN CONTESTANT'S NGB # ______________

DIVISION YOU WISH TO ENTER: ______________ RANK: __________

RULES: The current rules of the International Judo Federation (IJF) as modified.

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4. Kansetsu waza allowed in all senior divisions regardless of age. (min. age for Sr. div. is 13)
5. 2002 Medical Rules

THE WARNING, WAIVER AND RELEASE OF LIABILITY AND AGREEMENT TO PARTICIPATE (on back side) AND CERTIFICATE REGARDING NON-BLACK BELT CONTESTANTS must be executed and returned with the ENTRY FORM.

CERTIFICATE REGARDING NON-BLACK BELT CONTESTANT

I, ______________________, a Judo instructor who holds the Judo Rank of Shodan or higher, which has been awarded under the auspices of the United States Judo Federation, Inc., United States Judo Association, or United States Judo, Inc., hereby certifies that the above Contestant, although not having been awarded the Judo Rank of Shodan or higher is of sufficient aptitude and skill in Judo to compete in the above described event.

______________________________
(signature of Judo Instructor)
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 North Coast Championships, and related events and activities of the United States Judo Federation, Inc., United States Judo, Inc., United States Judo Association, Inc., A.T.J.A., A.J.F., Konan Judo Yudanshaki, Ohio Judo, Inc., City of Lorain, Church on the North Coast, Chu To Bu/Brasa Judo, Jiu Jitsu, I hereby:

1. Acknowledge that I am familiar with the sport of Judo and understand the 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 Traumatic Brain Injury (TBI), 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, permanent disability, or death.

5. Release, waive, discharge and covenant not to sue the United States Judo Federation, Inc., United States Judo, Inc., United States Judo Association, Inc., A.T.J.A., A.J.F., Konan Judo Yudanshaki, Ohio Judo, Inc., City of Lorain, Church on the North Coast, Chu To Bu/Brasa Judo, Jiu Jitsu, 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 in conducting the event, all of whom are hereinafter referred to as "Releasees", from any and all claims, demands, losses, or damages on account of injury, including permanent disability and death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the Releasees or otherwise to the fullest extent 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. 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/GUARDIAN AS EVIDENCED BY THEIR SIGNATURE BELOW.

Participant (please print name) ___________________ Participant's Signature ___________________ Date __________

FOR PARENTS/GUARDIANS OF PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT TIME OF REGISTRATION)

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 the 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 extent permitted by law. I have instructed the minor participant as to the above warnings and conditions and their ramifications.

Parent/Guardian (please print name) ___________________ Parent/Guardian’s Signature ___________________ Date __________

POWER OF ATTORNEY (IF CONTESTANT UNDER 18 YEARS OF AGE)

I certify that I am the parent/legal guardian of __________________________, a minor. I will not be in attendance at the tournament and do hereby designate __________________________, who is over 21 years of age, to be my true and lawful attorney, to act in my name, place and stead, to do any and every act and exercise any power that I might or could do or exercise through any other person and that he/she shall deem proper or advisable, intending hereby to vest in the person acting for me full power and authority to do an perform all and every act and thing.

Parent/Guardian Printed Name ___________________ Parent/Guardian’s Signature ___________________ Date __________