



SOUTHERN WISCONSIN JUDO CHAMPIONSHIPS



Saturday, October 21st, 2023
COMPETITION STARTS 2:30 PM

Tournament Location

JUDO INC.
7818 N. Teutonia Ave.
Brown Deer, WI 53209

Hosted by:



Tournament Director

Norman Miller
(414) 354-1898

ADVANCED REGISTRATION REQUIRED

ARRIVE BY 2:00 PM.

for 2:30 PM start

ENTRY FEE

Entries received **before October 8th—\$18.00**
Entries received after October 8th and
before October 14th deadline—\$22.00

*This event is licensed by the Amateur Athletic Union of the United States (AAU).
All participants must have a current AAU membership. Membership fee may not
be included as part of the entry fee to the event.*



- Official AAU Rules Govern This Event
- Contestants Grouped Using Age/Weight Factors
- Slippers, etc. Required Outside Mat Area

MEDALS

1st—3rd Place



All Participants Must be AAU Registered Athletes and Must Show Their Membership Card at Check-in.

- Register on-line at: aausports.org. Ages 17 & under (\$22.00); 18 & older (\$35.00)

No weigh in required... only an accurate weight estimate required

**TOURNAMENT FACILITY WILL BE SHARED WITH OUR FRIENDS AT KEMPO GOJU KARATE
WHO WILL RUN A KARATE SPARRING COMPETITION AT 11 AM.**

OFFICIAL ENTRY FORM WISCONSIN STATE JUDO CHAMPIONSHIPS

Name _____ Male _____ Female _____ Birthdate _____ Age _____

Home Address _____ City _____ Zip code _____

Area Code and Phone # _____ Judo Club _____ Judo Coach _____

AAU CARD NUMBER _____ E-Mail _____

In consideration of being allowed to participate in this event, the undersigned:

1. Acknowledge familiarity with the sport of judo and 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 or supervisor of such condition(s) and refuse to participate. Parent(s) or legal guardian(s) of minors agree to instruct the minor to this effect.
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 severe social and economic losses due to not only my own actions, inactions or negligence, but also to the action, inaction or negligence of others, the rules of this 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, assume that risk and accept personal responsibility for the damages following such injury, permanent disability or death.
5. Release, waive and discharge and covenant not to sue JUDO, Inc., AAU, the National and State Judo Organizations, 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(s), supervisors and coaches, sponsoring agencies, sponsors, advertisers, and, if applicable, owners, lessors and lessees of the premises used to conduct the event, all of whom are hereinafter released, 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 all of the aforementioned.
6. Parent(s) or legal guardian(s) of minor participants age 17 and below additionally agree that they will instruct the minor participant of the above warnings and conditions and their ramifications, and that they consent to the minor's participation.
7. Has received judo coach's indication of having sufficient aptitude and skill in judo to compete in this event.

**BEFORE
RETURNING
THIS
FORM...**

1. Complete all information
2. Accurate weight estimate
3. Sign waiver and release
4. Checks payable to Judo Inc.

ENTRY FEE ENCLOSED	\$ _____
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I/WE HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT I/WE GIVE UP SUBSTANTIAL RIGHTS BY SIGNING IT AND SIGN IT VOLUNTARILY.

Printed Name of Participant _____ Signature _____ Date _____

Printed Name of Parent, if a minor _____ Signature _____ Date _____

MUST INCLUDE ACCURATE ESTIMATE OF YOUR WEIGHT

POUNDS

THE SIGNATURE(S) ABOVE ALSO INDICATE THAT I/WE FULLY UNDERSTAND THE TIME DEADLINES, WEIGH-IN AND OTHER PROCEDURES OF THIS EVENT. CONTESTANT FURTHER AGREES TO CONDUCT SELF IN A RESPECTABLE AND SPORTSMANLIKE MANNER AT ALL TIMES DURING THE TOURNAMENT.