

Release Form for Minors (Competitors under 18 years of age)

NOTE: This is a legal document which must be properly completed and signed, in order for your entry to be accepted. The content of this document affects your rights as a Judo Ontario member. If you do not understand it, we recommend you obtain legal advice before signing.

RELEASE, INDEMNITY, WARRANTY, AND ASSUMPTION OF RISK

In consideration of the acceptance of the entry of the child named below (hereinafter referred to as "the said child") to compete in and /or being permitted to participate in Tora Annual Tournament (hereinafter referred to as "this tournament"), I/We for myself/ourselves and for and on behalf of the said child hereby release, remise and forever discharge, and agree to indemnify and save harmless The Ontario Judo Black Belt Association, the organizers of this tournament, their respective officers, executives, directors, officials, agents, servants and representatives (hereinafter referred to as "the Releases") from and against all claims, actions, costs, expenses and demands in respect of death, injury, loss or damage to the person or property of the said child, or myself/ourselves, howsoever caused, arising out of or in connection with the said child competing or participating in this tournament and notwithstanding that the same may have been caused by, contributed to or occasioned by the negligence, breach of contract, breach of a common duty of care as an occupier of premises, or otherwise, of or by the Releases or any of them.

I/We agree for myself/ourselves and for and on behalf of the said child to assume all risks, both known and unknown, and all consequences thereof, arising out of or in connection with the said child competing or participating in this tournament and to adhere to all rules, regulations and conditions of this tournament.

I/WE CERTIFY THAT:

1. The said child is in good physical condition and has no injury within the last 60 days (e.g. concussion, sprain), disease or disability nor has he/she injected or ingested anything that would impair his/her performance or physical condition or increase the likelihood of injury in competing or participating in this tournament.
2. No physician, nurse, therapist, trainer, coach, manager or other person has advised me/us not to allow the said child to compete or participate in a body contact sport or in this tournament.
3. I/we am/are familiar with the sport of judo and the nature of a judo contest. I/We am/are aware that there is a high risk of injury by the very nature of the sport.
4. We are the father and mother of the said child or the Guardian(s) of the said child and the only person(s) entitled to act for and on behalf of the said child.
5. This Release Form authorizes the Tournament Director, after consultation with me, to permit a change in either age or weight categories or both as permitted by Judo Ontario's Tournament Standards Policy.
6. We are aware of the code of conduct governing this sport and agree to comply. We understand that disciplinary action will be used if there is a violation of the code of conduct.

THIS DOCUMENT SHALL BE BINDING UPON THE SAID CHILD, MYSELF/OURSELVES, HIS/HER/OUR HEIRS, EXECUTORS, ADMINISTRATORS, ASSIGNS, AND PERSONAL REPRESENTATIVES OF EACH OF US AND THE SAID CHILD.

I/we have read this document and I/we understand it fully.

CHILD'S
NAME.....

PARENT/GUARDIAN

PARENT/GUARDIAN

DATE:

SIGNED:.....

PRINT NAME / RELATIONSHIP

PRINT NAME / RELATIONSHIP

Release form for Adults (Competitors 18 years old and older)

NOTE: This is a legal document which must be properly completed and signed, in order for your entry to be accepted. The content of this document affects your rights as a Judo Ontario member. If you do not understand it, we recommend you obtain legal advice before signing.

RELEASE, INDEMNITY, WARRANTY, AND ASSUMPTION OF RISK

In consideration of the acceptance of my entry to compete in and/or my being permitted to participate in ____Tora Annual Tournament____ (hereinafter referred to as "this tournament"), I hereby release, remise and forever discharge, and agree to indemnify and save harmless The Ontario Judo Black Belt Association, the organizers of this tournament, their respective officers, executives, directors, officials, agents, servants and representatives (hereinafter referred to as "the Releases") from and against all claims, actions, costs, expenses and demands in respect of death, injury, loss or damage to my person or property, howsoever caused, arising out to or in connection with my competing or participating in this tournament and notwithstanding that the same may have been caused by, contributed to or occasioned by the negligence, breach of contract, breach of a common duty of care as an occupier of premises, or otherwise, of or by the Releases or any of them.

I agree to assume all risks, both known and unknown, and all consequences thereof, arising out of or in connection with my competing or participating in this tournament. I agree to adhere to all rules, regulations and conditions of this tournament.

I CERTIFY THAT:

1. I am in good physical condition and I have no injury within the last 60 days (e.g. concussion sprain), disease or disability nor have I injected or ingested anything that would impair my performance or physical condition or increase the likelihood of injury in competing or participating in this tournament.
2. No physician, nurse, therapist, trainer, coach, manager or other person has advised me not to compete or participate in a body contact sport or in this tournament.
3. I am familiar with the sport of judo and the nature of a judo contest. I am aware that there is a high risk of injury by the very nature of the sport.
4. This Release Form authorizes the Tournament Director, after consultation with me, to permit a change in either age or weight categories or both as permitted by Judo Ontario's Tournament Standards Policy.
5. I am aware of the code of conduct governing this sport and agree to comply. I understand that disciplinary action will be used if there is a violation of the code of conduct.

THIS DOCUMENT SHALL BE BINDING UPON ME, MY HEIRS, EXECUTORS, ADMINISTRATORS, ASSIGNS AND PERSONAL REPRESENTATIVES.

I have read this document and I understand it fully.

DATE:
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SIGNED: