



Name					
Date of Birth / / day month year					
Gender:	MALE		FEMALE		
Belt Colour	Yellow		yellow/orange		
	Orange		orange/green		
Address:					
Email:					
Phone #					
J.O. #					
Home Club:					
Dojoshu/ Instructor					

Shiai Division - Circle
U10 Born 2015-2016
U12 Born 2013-2014
U14 Born 2011-2012
U16 Born 2009-2010
Weight – to be filled in by Officials

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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 Sunday Tournament	(hereinafter referred to as
"this tournament"), I/We for myself/ourselves and for	and on behalf of the said child hereby re	lease, remise and forever discharge,
and agree to indemnify and save harmless The Ontario	Judo Black Belt Association, the organize	ers of this tournament, their
respective officers, executives, directors, officials, ager	nts, servants and representatives (herein	after referred to as "the Releases")
from and against all claims, actions, costs, expenses an	d demands in respect of death, injury, lo	ss or damage to the person or
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negligence, breach of contract, breach of a common du	uty of care as an occupier of premises, or	otherwise, of or by the Releases or
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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.
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- 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.

CHILD'S NAME		
PARENT/GUARDIAN	PARENT/GUARDIAN	DATE:
NAME / RELATIONSHIP	NAME / RELATIONSHIP	





Name							
Date of Birth / / day month year							
Gender:	MALE		FEMALE				
Belt Colour	Yellow		yellow/orange				
	Orange		orange/green				
Address:							
Email:							
Phone #							
J.O. #							
Home Club:							
Dojoshu/ Instructor							

Shiai Division - Circle
U10 Born 2015-2016
U12 Born 2013-2014
U14 Born 2011-2012
U16 Born 2009-2010
Weight – to be filled in by Officials

NOTE: This is a legal document which must be properly completed and signed 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 o	child named below (hereinafter referred	to as "the said child") to compete in
and /or being permitted to participate in	Tora Sunday Tournament	(hereinafter referred to as
"this tournament"), I/We for myself/ourselves and for	and on behalf of the said child hereby re	lease, remise and forever discharge,
and agree to indemnify and save harmless The Ontario	Judo Black Belt Association, the organize	ers of this tournament, their
respective officers, executives, directors, officials, ager	nts, servants and representatives (herein	after referred to as "the Releases")
from and against all claims, actions, costs, expenses an	d demands in respect of death, injury, lo	ss or damage to the person or
property of the said child, or myself/ourselves, howsoe	ever caused, arising out of or in connection	on with the said child competing or
participating in this tournament and notwithstanding t	hat the same may have been caused by,	contributed to or occasioned by the
negligence, breach of contract, breach of a common du	uty 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.

CHILD'S NAME		
PARENT/GUARDIAN	PARENT/GUARDIAN	DATE:
NAME / RELATIONSHIP	NAME / RELATIONSHIP	