



# **40<sup>th</sup> Annual USJA Junior National Judo Championships** **16<sup>th</sup> Annual USJA Junior National Kata Championships**

**San Diego, California June 20-21, 2009**

## **Tournament Headquarters/Location**

The Town and Country Hotel and Convention Center  
500 Hotel Circle North  
San Diego, California 92108  
(800) 772-8527

Room Rates \$135 per night. Please mention **United States Judo Association**

Deadline for room reservation: June 10, 2009

Parking fee \$6 per day for hotel guests and \$4 per hour (not to exceed \$14 per day) for local guests.

## **Host Club:**

Unidos Judo Clubs

## **Tournament Directors**

Jesse Jones (951) 461-1661 (Home) JesaJoa@aol.com  
Mark Hays (619) 596-6759 (Home) MandDHays@cox.net

## **Registration Chairperson**

Jenifer Leith-Beckett (619) 276-1725 JenSweetFeet@Yahoo.com

## **Head Referee**

Mark Yamanaka – IJF A

## **Awards**

Medals will be awarded for 1<sup>st</sup>, 2<sup>nd</sup> and two 3<sup>rd</sup> places for each division  
1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup> place teams will receive awards. 5 points for every 1<sup>st</sup> place, 3 points for every 2<sup>nd</sup> place and 2 points will be awarded for 3<sup>rd</sup> place.

**Sanction # USJA 09-005**

## Registration Information

Mail completed registration with payment and all applicable forms to

**2009 USJA Junior Nationals**  
**Unidos Judo Clubs**  
**38548 Falkirk Dr**  
**Murrieta, CA 92563**

Proof of Birth is required for all contestants. Acceptable forms include birth certificate or passport or a USA Judo membership card with a "V" next to the birth date.

If the contestant is a black belt in Judo, they need to provide a copy of their black belt certificate.  
If the contestant is not a black belt, they need to provide a copy their instructor's black belt certificate along with the form regarding the contestant ability.

Copy of national membership (USJA, USJF, USA Judo or foreign national registration) will be required.

## Fees

All checks should be made payable to: **Unidos Judo Clubs**

Any returned checks will be charged an additional \$25 fee.

During walk-up registration only Cash, Money orders or travels checks will be accepted.

Incomplete registrations must be corrected before the deadlines to be considered on time.

### **All entry fees are non-refundable**

<b>Event</b>	<b>Pre-Registration</b> Postmarked no later than May 26, 2009	<b>Late Registration</b> Postmarked no later than June 9, 2009	<b>Walk-up Registration</b> At tournament – Check in no later than 4pm on June 19, 2009
Individual Competition	\$60	\$80	\$100
2 competitors from the same Family*	\$110	\$150	\$175
3 competitors from the same family*	\$165	\$210	\$235
4 competitors from the same family*	\$200	\$250	\$275
1 Kata (Per Team)	\$75	\$100	\$125
2 Katas (Per Team)	\$95	\$120	\$145
3 Katas (Per Team)	\$105	\$140	\$165
Coaches badges	\$10	\$10	\$25
**Spectator Fee 1 day	\$10	\$10	\$15
**Spectator Fee 2 days	\$15	\$15	\$20

\* To Receive family discount all entries must be received at the same time.

\*\*Children 5 years and under will be admitted for free.

## Rules

### Eligibility:

All Shiai and Kata contestants both females and males who are current members of either USJA, USJF, USA Judo who were born between January 1, 1990 through December 31, 2003). Other international organizations will be accepted when meeting the same age requirements and proof of current registration with their respective organizations.

Current modified IJF rules- Pre 1994 rules on out of bounds area. This tournament will use the Pre 1994 IJF contest rules regarding safety and out of bounds area, which permits reduction of safety areas and the common safety areas when two or more competition areas are utilized. (2.5 meters (8'2") safety area and 3 meters (9'8") for common areas.)

Shime-waza (chokes): allowed in Juvenile A, B, and IJF Youth

Kansetsu-waza (armlocks): allowed in IJF Youth

Match length: Bantam, Intermediate, and Juvenile A 3 minutes

Match length: Juvenile B, IJF Youth 5 minutes

Time limit for Golden Score will be 3 minutes for all divisions.

### Injury Rule

Decisions as to whether an athlete may continue if injured while on the mat, are to be resolved in accordance with IJF rules: such decisions occurring off the mat or not covered by the IJF rules, are to be made by the coach, the athlete, and the team doctor. If there is not a unanimous opinion among these three individuals, the athlete may not continue.

### Match Numbering System

Pools will be posted as soon as possible after the close of designated weigh-ins. (Coaches please check the draw sheets to make sure your players are in their correct brackets) Competitors are required to report to the match 5 minutes before their number.

### Method of Competition

*Divisions with six (6) competitors or more:* Straight double elimination system.

*Divisions having five (5) competitors or less:* Round Robin Pool

Every competitor will compete against everyone in their respective pool.

Winner will be determined by number of wins.

Tie breakers

A. Head to Head Competition

B. Points based on level of win. Ippon=10, waza-ari=7, yuko=5, no-score decision=1

C. Round-Robin showdown

### Judo Gis

White Judo Gis are mandatory! Blue Judo Gis are optional. Only blue competitors (First name called) have the option of wearing a blue Judo Gi. In matches in which both competitors are wearing white Judo Gis, both contestants must wear a white or blue belt respectively.

**Shiai competitors must supply your own White and Blue Belts**

## Weight Divisions

The Age/Weight divisions are listed below. Each category is based solely on the year the contestant was born. The age of the contestant on the day of competition is irrelevant.

Contestants will not be permitted to enter a division they do not qualify to compete in according to age and weight, except for Juvenile B competitors may also (or instead of) compete in the IJF Youth divisions. The only contestants that may compete in 2 divisions are Juvenile B Contestants.

Uncontested players may elect to move up either to the next older category or the next higher weight division. Approval of parent or guardian is required. Players and parents will not be notified, but will be moved in accordance with the age/weight change form. In the event a contest moves up to the next older division, they will compete under the rules of the older division.

### Male

Category	Year Born	All weights in Kilograms								
Bantam Jr.	2004	19	23	28	28+					
Bantam 1	2003	19	23	28	28+					
Bantam 2	2002	21	25	30	30+					
Bantam 3	2001	23	27	31	35	35+				
Intermediate A	1999-2000	26	30	34	38	43	43+			
Intermediate B	1997-1998	28	31	34	38	42	48	53	53+	
Juvenile A	1995-1996	36	40	44	48	53	58	64	64+	
Juvenile B	1993-1994	51	55	60	66	73	81	90	90+	
IJF Junior	1990-1992	55	60	66	73	81	90	100	100+	Open

### Female

Category	Year Born	All weights in Kilograms								
Bantam Jr.	2004	19	23	28	28+					
Bantam 1	2003	19	23	28	28+					
Bantam 2	2002	21	25	30	30+					
Bantam 3	2001	23	27	31	35	35+				
Intermediate A	1999-2000	26	30	34	38	43	43+			
Intermediate B	1997-1998	28	31	34	38	42	48	53	53+	
Juvenile A	1995-1996	36	40	44	48	53	58	64	64+	
Juvenile B	1993-1994	40	44	48	52	57	63	70	70+	
IJF Junior	1990-1992	44	48	52	57	63	70	78	78+	Open

The tournament directors reserve the right to make adjustments as necessary in the best interest of the safety of the competitors.

## Schedule of Events

### **Friday June 19, 2009 – All activities at the Tournament Headquarters – Town and Country Hotel and Convention Center**

- 9:00 am – 4:00 pm Tournament check-in and walk up registration for all competitors, coaches, referees and officials. Competitors of Bantam, Intermediate and Juvenile B divisions must check in during this time. Competitors of Juvenile A, IJF Youth junior divisions and kata may check in on Saturday instead.
- 9:00 am – 4:00 pm Weigh-in for all competitors. Competitors of Bantam, Intermediate and Juvenile B divisions must weigh in during this time. Competitors of Juvenile A and IJF Youth divisions may weigh in on Saturday instead.
- 5:00 pm – 7:00 pm USJA Executive Board of Directors meeting
- 7:00 pm – 8:00 pm Coaches meeting
- 7:00 pm – 8:00 pm Technical Officials meeting

### **Saturday June 20, 2009 – All activities at the Tournament Headquarters – Town and Country Hotel and Convention Center**

- 8:00 am Doors open. Match cards available for Saturday's competition
- 8:00 am – 9:30 am Referee meeting
- 9:30 am Opening Ceremonies
- 10:00 am Competition begins – Bantam, Intermediate, Juvenile B. All divisions will play until their completion
- 2:00 pm – 4:00 pm Check-in for Juvenile A, IJF youth divisions and Kata Competitors
- 2:00 pm – 4:00 pm Weigh-ins for Juvenile A, IJF Youth divisions

### **Sunday June 21, 2009 – All activities at the Tournament Headquarters – Town and Country Hotel and Convention Center**

- 8:00 am Doors open. Match cards available for Sunday's competition
- 9:30 am Kata competition begins
- Immediately following the kata competition the Juvenile A and IJF Youth divisions will begin competition

# Individual Entry Form

Please print legibly. We must be able to read your information!

Circle the category (Only juvenile B contestants may optionally select the IJF Youth category)								
Bantam Jr 2004	Bantam 1 2003	Bantam 2 2002	Bantam 3 2001	Inter. A 1999 - 2000	Inter B 1997 - 1998	Juv A 1995 - 1996	Juv B 1993 - 1994	IJF Youth 1990 - 1992
Enter approximate weight in Kilos _____				Gender (Circle One) Male Female				

Contestant's First name

Last name (Family name, Surname)

Street Address

City

State

Zip Code

Country

Telephone

Date of Birth (MM/DD/YYYY)

Judo Rank

National Organization

Membership Number

Expiration Date (MM/DD/YYYY)

Club Name

Name of Judo Instructor/Coach

Parent/Guardian First name

Parent/Guardian Last Name (Family name, Surname)

Emergency Phone Number

Email Address

Cell phone contact at tournament

Juvenile B Competitors may compete in the IJF Youth divisions instead of or in addition to the Juvenile B division. Each division requires a separate entry form.

# Kata Entry Form

Please print legibly. We must be able to read your information!  
Tori and Uke must submit separate forms for each Kata

<b>Nage No Kata:</b>	<b>Junior: First 3 sets</b>	<b>Youth:</b>	<b>All 5 sets</b>
<b>Katame No Kata:</b>	<b>Junior: First 2 sets</b>	<b>Youth:</b>	<b>All 3 sets</b>
<b>Ju No Kata:</b>	<b>Junior: First 2 sets</b>	<b>Youth:</b>	<b>All 3 sets</b>

Junior born 1997–2004	Male, Female or mixed teams allowed
Youth born 1990-1996	Male, Female or mixed teams allowed

Circle the category		Circle the Kata		
<b>Junior (1997-2004)</b>	<b>Youth (1990-1996)</b>	<b>Nage No Kata</b>	<b>Katame No Kata</b>	<b>Ju No Kata</b>
Circle the Kata Role:      Tori                      Uke				

Contestant's First name	Last name (Family name, Surname)
<input type="text"/>	<input type="text"/>

Street Address

City	State	Zip Code	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Telephone	Date of Birth (MM/DD/YYYY)	Judo Rank
<input type="text"/>	<input type="text"/>	<input type="text"/>

National Organization	Membership Number	Expiration Date (MM/DD/YYYY)
<input type="text"/>	<input type="text"/>	<input type="text"/>

Club Name	Name of Judo Instructor/Coach
<input type="text"/>	<input type="text"/>

Parent/Guardian First name	Parent/Guardian Last Name (Family name, Surname)
<input type="text"/>	<input type="text"/>

Emergency Phone Number	Email Address
<input type="text"/>	<input type="text"/>

Cell phone contact at tournament

Kata partner's First name	Kata partner's Last name (Family name, Surname)
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**WARNING,  
WAIVER AND RELEASE OF LIABILITY AND AGREEMENT TO PARTICIPATE  
ALL COMPETITORS SHIAI AND KATA**

In consideration of being permitted to participate in any way, including travel to and from the 2009 Junior National and Kata Judo Championships, practice, clinic, and related events and activities of the **United States Judo Association, Inc., United States Judo, Inc., United States Judo Federation, Inc., Town and Country Hotel and Convention Center, Pacific Southwest Judo Association and Unidos Judo Clubs**, 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 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, or negligence of others, the rules of the sport 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.

Release, waive, discharge and covenant not to sue the **United States Judo Association, Inc., United States Judo, Inc., United States Judo Federation, Inc., Town and Country Hotel and Convention Center, Pacific Southwest Judo Association and Unidos Judo Clubs**, 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 is 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 Name (please print) \_\_\_\_\_

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/Legal Guardian (please print) \_\_\_\_\_

Parent/Legal Guardian 's Signature \_\_\_\_\_ Date \_\_\_\_\_

## MEDICAL RELEASE AND CONSENT TO THE TREATMENT OF A MINOR

If the Participant is under the age of 18 years, the signature of a Parent or Legal Guardian is required.

Contestant's Name (Last) \_\_\_\_\_ (First): \_\_\_\_\_ (MI): \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_ Day Phone: (\_\_\_\_) \_\_\_\_\_ Eve. Phone: (\_\_\_\_) \_\_\_\_\_  
Parent(s)/Legal Guardian(s): \_\_\_\_\_ Emergency Phone: (\_\_\_\_) \_\_\_\_\_  
Date of Birth: (Mo): \_\_\_\_\_ (Day): \_\_\_\_\_ (Yr): \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_ Female \_\_\_\_\_ Male  
USJF#: \_\_\_\_\_ USA Judo#: \_\_\_\_\_ USJA# \_\_\_\_\_

**(One required)**

I, (we), the undersigned parent(s)/legal guardian(s) of \_\_\_\_\_, a minor, do hereby authorize **United states Judo Association Inc., Its Tournament Directors, Referee Director, and Any and All Organizers, Promoters, Officers, Staff, Referees, Tournament Workers and Volunteers of the 2009 USJA Junior and Kata National Judo Championships**, hereafter referred to as the "**CHAMPIONSHIPS**", as agent(s) for the undersigned to consent to any x-ray examination, anesthetic, medical or surgical diagnosis, or treatment and hospital care which is deemed advisable by, and is to be rendered under the general or special supervision of any physician and surgeon, licensed under the provisions of the Medical Practice Act on the medical staff of a licensed hospital, whether such diagnosis or treatment is rendered at the office of said physician or at said hospital.

**PLEASE INITIAL** \_\_\_\_\_

It is understood that this authorization is given in advance of any specific diagnosis, treatment of hospital care being required, but is given to provide authority and power on the part of our aforesaid agent(s) to give specific consent to any and all such diagnosis, treatment or hospital care which the aforementioned physician, in the exercise of his best judgment, may deem advisable.

**PLEASE INITIAL** \_\_\_\_\_

This authorization is given pursuant to provisions of the Civil Code of California and shall remain in effect until June 22, 2009, unless sooner revoked in writing and delivered to said agent(s).

**PLEASE INITIAL** \_\_\_\_\_

It is understood that the parent(s)/guardian(s) of \_\_\_\_\_ are responsible for all costs that may be incurred as a result of the diagnosis, treatment or hospital care while traveling to or competing in the **CHAMPIONSHIPS**. It is also understood that the **CHAMPIONSHIPS/agent(s)** will contact the parent(s)/guardian(s) at the first opportunity available, but will have the welfare of the injured minor as a first priority. In the event that the parent(s)/guardian(s) are unable to make decisions concerning the need for medical diagnosis, treatment or hospital care, either a **CHAMPIONSHIPS** official or, in the event of a life or death threatening situation, a proper authority (police, fire, rescue, medical, etc.) will be authorized to give consent for diagnosis, treatment or hospital care.

**PLEASE INITIAL** \_\_\_\_\_

The undersigned has carefully read and voluntarily signed the MEDICAL RELEASE AND CONSENT TO THE TREATMENT OF A MINOR form, and further agrees that no oral representations, statements, or inducements apart from the foregoing written have been made; and that the undersigned understands that this contract constitutes a MEDICAL RELEASE AND CONSENT TO THE TREATMENT OF A MINOR.

**PLEASE INITIAL** \_\_\_\_\_

Participant Name (please print) \_\_\_\_\_

Participant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Legal Guardian (please print) \_\_\_\_\_

Parent/Legal Guardian 's Signature \_\_\_\_\_ Date \_\_\_\_\_

## POWER OF ATTORNEY

**Must be signed by Parent/Legal Guardian(s) of any contestant under the age of 18 not accompanied by a Parent/Legal Guardian at the 2009 Junior and Kata National Judo Championships**

\_\_\_\_\_, I, (we), the parent(s)/legal guardian(s) of \_\_\_\_\_  
**(Initial)** \_\_\_\_\_ **(Contestant)**  
will be attending these Championships. Therefore, the signature of the contestant's Parent(s)/Legal Guardian(s) is not required.

\_\_\_\_\_, I, (we), the parent(s)/legal guardian(s) of \_\_\_\_\_  
**(Initial)** \_\_\_\_\_ **(Contestant)**  
will **NOT** be attending these Championships, and have made, constitute and appoint

\_\_\_\_\_ person and that he/she shall deem proper or advisable, intending hereby to vest in him/her, irrevocable and full power and authority to do and perform all and every act and thing whatsoever requisite and necessary to be done in connection with the Contestant participating in the 2009 Junior National and Kata Judo Championships, registering for events, receiving medical treatment and make any other decisions as I (we) might or could make or do if personally present. **(Parent(s)/Legal Guardian(s) and witness signature required).**

\_\_\_\_\_  
Parent/Legal Guardian Signature Date

\_\_\_\_\_  
Witness Signature Date

\*\*\*\*\*

## CERTIFICATE REGARDING CONTESTANT'S ABILITY

I, \_\_\_\_\_ a Judo Instructor, who has been awarded the Judo rank of Shodan or higher under the auspices of one of the following organizations, United States Judo Federation, United States Judo Association or United States Judo, Inc., hereby certify 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 these Championships.

Signature of parent or guardian \_\_\_\_\_ Date \_\_\_\_\_  
(if contestant is under 18 years of age)

Signature of Judo Instructor \_\_\_\_\_ Date \_\_\_\_\_

**PLEASE PROVIDE COPY OF YOUR INSTRUCTOR'S BLACK BELT CERTIFICATE OR IF YOU ARE SHODAN OR HIGHER A COPY OF YOUR BLACK BELT CERTIFICATE.**

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## CONSENT FOR COMPETITION BRACKET CHANGE

Must be signed by Parent(s)/Legal Guardian(s) of any contestant under the age of 18.

We (I), the undersigned parent(s)/legal guardian(s) of (contestant), have been informed of the age and weight classes (see the Age and Weight Class Form, Page 4) for competition in the 2009 USJA Junior and Kata National Judo Championships. In addition, **#1 or #2 must also be checked according to the above provisions. Please read and sign.**

1. \_\_\_\_\_ We (I), hereby express our consent and approval that \_\_\_\_\_,  
(Initial) (Contestant)

- A. \_\_\_\_\_ may move up to the next higher weight division in the same age category if their original division has only one or two competitors.
- B. \_\_\_\_\_ may move up to the next higher age division in if their original division has only one or two competitors. (This does not apply to Juvenile A Competitors.)
- C. \_\_\_\_\_ being in the Juvenile B, may also compete in IJF Youth category \_\_\_\_\_ (requires additional entry fee), or \_\_\_\_\_ compete in the IJF Youth category instead of their own age category.

2. \_\_\_\_\_ We (I), **do not consent** to a change in age/weight bracket for \_\_\_\_\_  
under any circumstances. (Print contestant's name)  
**I understand by selecting this option, the contestant might be uncontested, and will not have any matches.**

Parent/Legal Guardian signature: \_\_\_\_\_ Date: \_\_\_\_\_

## APPLICATION FOR COACH'S BADGE

This completed application, Coach's Certification document, and the attached Coach's Pledge of Ethical Conduct must be postmarked by June 3, 2009 or you will have to re-register at tournament headquarters.

**EACH COACH MUST SIGN AND SUBMIT THE COACH'S PLEDGE OF ETHICAL CONDUCT ON THE FOLLOWING PAGE WITH THIS APPLICATION. ALSO IN ORDER TO EXPEDITE THE REGISTRATION PROCESS, YOU MUST ATTACH A PHOTOCOPY OF YOUR COACH CERTIFICATION CREDENTIAL AND RETURN THIS FORM WITH IT.**

The number of coaches will be determined by the number of registered competitors. The maximum number of coaches per dojo will be 6. Each coach desiring to register must sign and submit the Coach's Pledge of Ethical Conduct on the following page. This signed pledge is required for registration as a coach.

### DOJO COACHES

Club: \_\_\_\_\_ Head Instructor: \_\_\_\_\_

**1st Coach's Name:** \_\_\_\_\_ Coach Certification Level: A B C D E  
Certified by: USJA USJF USA Judo Number: \_\_\_\_\_ e-mail: \_\_\_\_\_  
Organization membership and Number: USJA # \_\_\_\_\_ USJF# \_\_\_\_\_ USA Judo# \_\_\_\_\_

**2nd Coach's Name:** \_\_\_\_\_ Coach Certification Level: A B C D E  
Certified by: USJA USJF USA Judo Number: \_\_\_\_\_ e-mail: \_\_\_\_\_  
Organization membership and Number: USJA # \_\_\_\_\_ USJF# \_\_\_\_\_ USA Judo# \_\_\_\_\_

**3rd Coach's Name:** \_\_\_\_\_ Coach Certification Level: A B C D E  
Certified by: USJA USJF USA Judo Number: \_\_\_\_\_ e-mail: \_\_\_\_\_  
Organization membership and Number: USJA # \_\_\_\_\_ USJF# \_\_\_\_\_ USA Judo# \_\_\_\_\_

**4th Coach's Name:** \_\_\_\_\_ Coach Certification Level: A B C D E  
Certified by: USJA USJF USA Judo Number: \_\_\_\_\_ e-mail: \_\_\_\_\_  
Organization membership and Number: USJA # \_\_\_\_\_ USJF# \_\_\_\_\_ USA Judo# \_\_\_\_\_

**5th Coach's Name:** \_\_\_\_\_ Coach Certification Level: A B C D E  
Certified by: USJA USJF USA Judo Number: \_\_\_\_\_ e-mail: \_\_\_\_\_  
Organization membership and Number: USJA # \_\_\_\_\_ USJF# \_\_\_\_\_ USA Judo# \_\_\_\_\_

**6th Coach's Name:** \_\_\_\_\_ Coach Certification Level: A B C D E  
Certified by: USJA USJF USA Judo Number: \_\_\_\_\_ e-mail: \_\_\_\_\_  
Organization membership and Number: USJA # \_\_\_\_\_ USJF# \_\_\_\_\_ USA Judo# \_\_\_\_\_

**ONLY AUTHORIZED COACHES WITH 2009 USJA Junior National Judo Championships COACH BADGE WILL BE ALLOWED IN COMPETITION AREA.**

**There will be only one (1) coach per contestant during the competition.**

## Coach's Pledge of Ethical Conduct

I, \_\_\_\_\_, acting as a coach in these championships

(Print your name)

understand that I have a responsibility to conduct myself in an ethical manner. I will treat all officials, fellow coaches, spectators, and participating athletes in a respectful manner. As a coach it is my duty to show by example the foundation of judo philosophy – mutual welfare and benefit. It is by my example that these young boys and girls, men and women will be influenced to behave in an honorable and respectful manner. As a coach:

- I will not participate in or tolerate disrespectful behavior towards referees or other tournament officials.
- Even though I may disagree with a referee's ruling I will respectfully submit my complaint to the head referee for the mat involved. I will gracefully accept the final rulings of the referees. Thus, teaching my athletes by example respect for the sport of judo.
- I will require all of my athletes to act in respectful manner and maintain the highest standards of judo conduct.
- I will coach my athletes to compete to the best of their ability within the rules of sport judo.
- I will do my best to be a positive influence on my athletes. Showing them by example and word that good sportsmanship and the development of character are the most important benefits of judo.

I understand that as a coach at these 2009 USJA Junior and Kata National Judo Championships, I am expected to adhere to the above ethical standards. Further, failure to adhere to the above standards may result in my removal from the tournament premises.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Home Address/Mailing)

\_\_\_\_\_  
(Judo Club)

## Confirmation of Registration

For confirmation of registration, please include a self-addressed stamped envelope with this completed form and include all registration materials. Please check the items below that apply to your entry form, and include the requested information.

- Individual Entry Form
- Individual Entry Form (for second division, only available for Juvenile B Contestants.)
- Kata Entry Form
- Copy of current National membership card (USJA, USJF, USA Judo or Foreign registration)
- Proof of Age (Copy of birth certificate, or copy of relevant page of passport, or copy of USA Judo Membership card with date of birth marked with V)
- Entry Fees
- Copy of Black belt certificate of participant or coach and signed wavier regarding contestants ability.
- Signed consent for age/weight change
- Signed medical consent to the treatment of minors
- Signed warning, wavier and release of liability and agreement to participate form
- Power of Attorney form
- Applications for Coaches Badge (Required for Coaches)
- Coaches Pledge of ethical Conduct (Required for Coaches)
  
- I would like to purchase \_\_\_\_\_ spectator tickets for 1 day
- I would like to purchase \_\_\_\_\_ spectator tickets for 2 days

See page 2 for the applicable fees.

Mail completed entry forms to:  
**2009 USJA Junior Nationals**  
**Unidos Judo Clubs**  
**38548 Falkirk Drive**  
**Murrieta, CA 92563**