

WI Judo Referees Clinic

Date: Sunday, November 7th, 2010 starting at 9am

Location: RYS Dojo, 3017 Washington Ave, Racine WI 53405 (The old "Park Theater")

Registration: Complete form and bring to clinic.

Instructors: Tim Feest, Mark Frankel, David Malek, Dennis Staral

Summary: The clinic will consist of two sections, classroom and practical. The practical section will be run as a Novice Tournament starting at 1pm. This is the perfect opportunity for players to learn the in and outs of refereeing a match.

Schedule: 8:00a - 9:00a Clinic Registration and setup
9:00a - 12:00p On-Mat and Mat-side Work
12:00p - 1:00p Lunch break and tournament setup
12:00p - 12:30p Tournament Registration
1:00p - ??? Novice Tournament

Tentative Classroom Agenda:

- Go through the Rule Book - Highlighting items that Beginning Referees (and Judges) should initially be aware of.
- Osaekomi - What is/is not a mat hold? Demonstration
- Gestures - Consistency is key. Demonstration
- Low/Rolling Kata Guruma -- A Score? OR - Just a nice take-down for mat work? Demonstration.
- Kawazu-gake - Head Dives, Demonstration.
- Article 26 (Prohibited Acts and Penalties).
- Article 28 (Injury, Illness or Accident)
- Post 2003 Rules or modifications
- Rules
 - Dynamic Edge Rule.
 - Gripping - Interpretation on when to penalize, Demonstrate.
- Post Olympic Issues.
- Many Other Issues as time permits.

Practical: Each participant will referee matches at the Novice Tournament with an experienced, teaching referee backing them up. Matches will be run so that the referee can gain confidence and experience in real-world situations. Play may be stopped and calls explained by the teaching referee, allowing the participants time to absorb the call at issue.

FALL 2010 NEW REFEREE CLINIC REGISTRATION FORM AND WAIVER

For official use only. Do NOT write in this box!

Paid: Referee Clinic _____ Membership Ins. Verified: _____

First Name: _____

Last Name: _____

Judo Club: _____

Home Address: _____

City: _____ State/Prov: _____ Zip/Postal Code: _____

Birthdate: _____ Rank: _____

National Org: _____ ID#: _____ Card expiration: _____
(USJI, USJF, USJA, etc)

Email address: _____

WARNING!

In consideration of being permitted to participate in any way, including travel to and from, in any Judo tournament, practice, clinic and related events and activities of the United States Judo, Inc., United States Judo Federation, United States Judo Association, Wisconsin Judo Inc. the Racine Youth Sports Organization, Racine Youth Sports Judo Club, Racine Kyu Dojo Judo Club,

I hereby:

1. Acknowledge that I am familiar with the sport of Judo and understand the rules governing the sport of Judo and the importance of following these rules.

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.

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 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 miles involved in the sport of Judo, I 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 the United States Judo, Inc., United States Judo Federation, United States Judo Association, 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, guardian(s), supervisors and coaches, sponsoring agencies, sponsors, Advertisers' and, if applicable, owner, lessors, and lessees of premises used to conduct 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 Signature

Date

BADGER NOVICE FALL 2010 JUDO TOURNAMENT

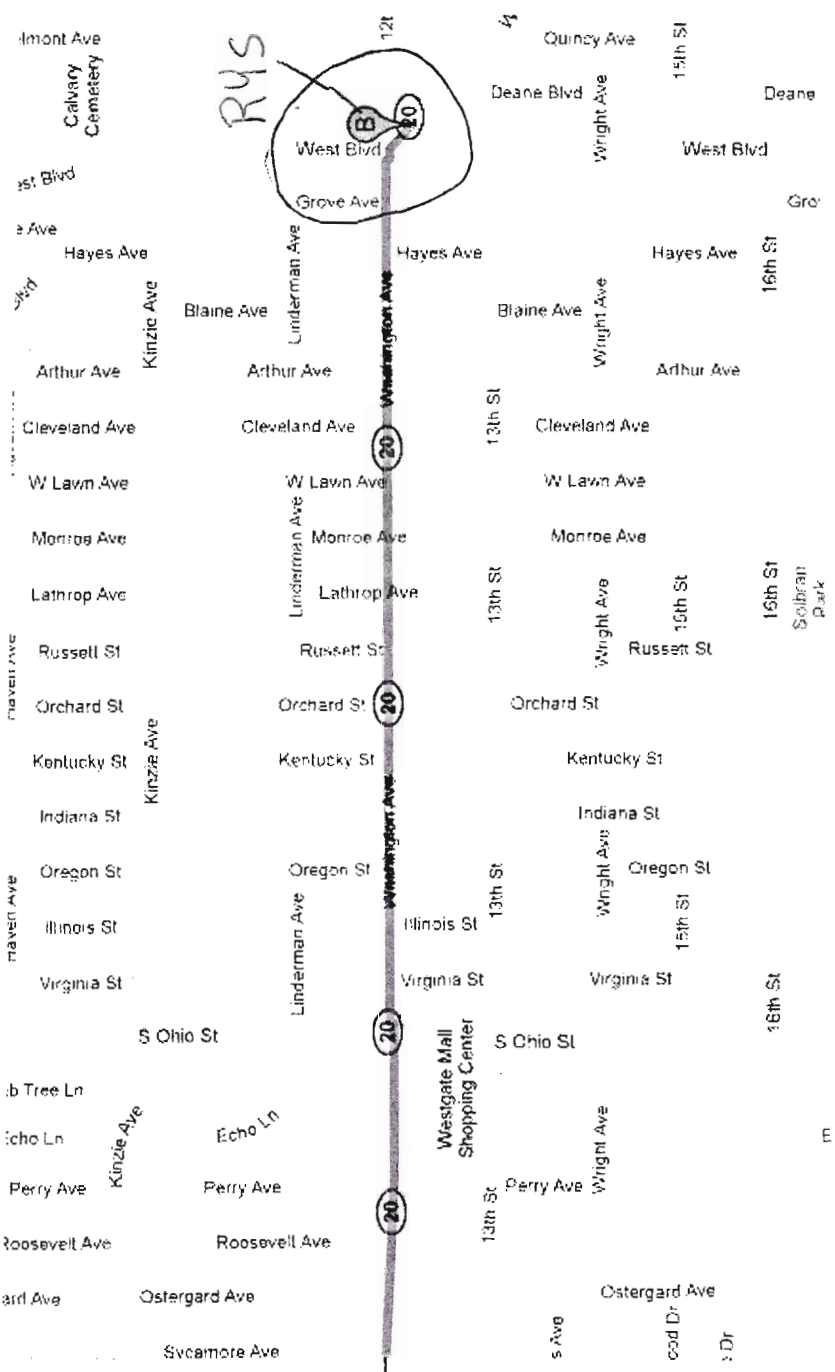
Sunday November 7, 2010

Wisconsin Judo Sanction

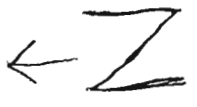
Racine, Wisconsin

| | |
|---------------------------|--|
| LOCATION | Old "Park Theater", 3017 Washington Ave, Racine, Wisconsin |
| SCHEDULE OF EVENTS | 8:30a -9:00a Referee Clinic Registration 9:00a -12:00p Referee Clinic Session 12:00p -12:30p Novice Player Registration 1:00p Opening Ceremony, Competition begins. |
| PLAYER ELIGIBILITY | To play in this tournament you must meet the following requirements: Junior players - white, yellow or orange belt. Unranked players who have participated in more than 5 tournaments are not eligible. Age 12 and Under on the day of the Tournament COMPETITOR Proof of valid national membership must be presented by all participants – NO EXCEPTIONS USA Judo, USJF, USJA memberships available at tournament or online at: https://webpoint.usjudo.org/wp/Memberships/Join.asp |
| ENTRY FEES | \$10 - PRIMARY DIVISION, REGISTER AT THE DOOR \$5 for any additional divisions |
| COMPETITION | 1 regulation judo mat, smaller safety zone. Round robin for divisions of 5 or fewer competitors. True Double Elimination pools for division of 6 or more. Mixed Gender Pools allowed only for ages 10 and under. Medals will be awarded for 1st, 2nd and 3rd places at the completion of divisions. Match length: 2 minutes for 10 and under, 3 minutes for Juniors 11 and over Because this is a novice tournament, matches will run full time limit and multiple ippons may be awarded. Match will end when time runs out, a player is ahead by 3 ippons or losing player concedes. THIS IS A TEACHING TOURNAMENT. All play will be refereed by a student referee backed up by an experienced teaching referee. Play may be momentarily stopped to explain points of play to the student referee or novice players. |
| STAFF | Tournament Director: Mark Frankel mfran5@charter.net (920)251-0737 Head Referee: David Malek Pools and Registration: Michael Blakeslee mcbreply@mcb-us.com (920)960-7344 |

CONCESSIONS: There will be NO concessions sold at this event. Participants will need to bring their own water bottle and snacks.



1-94 Highway
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OFFICIAL BADGER NOVICE FALL 2010 JUDO TOURNAMENT ENTRY FORM

| | | | |
|--|----------------------|-------------------------------------|-----------------------|
| For official use only. Do NOT write in this box! | | | |
| Reg. ID# _____ | Entry Fee Paid _____ | Membership/Insurance Verified _____ | Official Weight _____ |

Last Name: _____ First Name: _____ MI: _____

Sex: _____ Age: _____ Birth Date M/DIY: _____ Rank: _____ Est. Playing Weight: _____

Junior (ages 5-12)

If needed, I would play in additional no-cost divisions that fit my weight and ability.
For additional, optional competition, when available, check one or more of the following:

Move up/down age bracket within division

Move up in weight

National Org: ID# _____ Insurance Expiration Date: _____ (USA
Judo, USJA, USJF, etc.)

Judo Club: _____

Home Address: _____

City: _____ State/Prow: _____ Zip/Postal Code: _____

Email Address: _____

CERTIFICATE REGARDING NON-BLACK BELT CONTESTANTS

The undersigned, _____, a Judo Instructor who holds the rank of Shodan or higher which is recognized by USA Judo, USJF, USJA, Judo Canada, or any provincial governing body, hereby certifies that the above Contestant, although not having been awarded the Judo Rank of Shodan or higher, is of sufficient aptitude and skill to compete in the above described event.

Signature of Instructor: _____ Date: _____

POWER OF ATTORNEY

If contestant is under the age of 18 years, this document must be completed

by the contestant's parent or legal guardian if the parent or legal guardian is not attending the tournament.

I certify that I am the parent or 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 I the person acting for me full power and authority to do and perform all and every act and thing.

Signature of Parent/Legal Guardian _____ Date: _____

Please sign the WARNING WAIVER AND RELEASE OF LIABILITY AND AGREEMENT TO PARTICIPATE on back.

Badger Novice Fall 2010 Judo Tournament

November 7, 2010

WARNING!

WAIVER AND RELEASE OF LIABILITY AND AGREEMENT TO PARTICIPATE

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4. Knowing the rules involved in the sport of Judo, I 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 the United States Judo, Inc., United States Judo Federation, United States Judo Association, 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, guardian(s), supervisors and coaches, sponsoring agencies, sponsors, advertisers and, if applicable, owners, lessors, and lessees of premises used to conduct 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.

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Parent/Guardian Signature

Date