



## 2017 Virginia Commonwealth Games at Liberty University Judo Entry Form

Consult the website for sport registration fees. **There is an additional \$5 fee for mail-in registrations**, to avoid this fee, please register online at [www.CommonwealthGames.org](http://www.CommonwealthGames.org). Be sure to sign the waiver and mail registration to:

Virginia Amateur Sports

711-C 5<sup>th</sup> Street NE

Roanoke, Virginia 24016

**No phone entries. No fax entries. No email entries. No refunds.**

**All athletes competing in 2 categories must fill out 2 entry forms.**

### Athlete Information:

First Name \_\_\_\_\_ Last name \_\_\_\_\_

Gender \_\_\_\_\_ Email address \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone number \_\_\_\_\_ Birthday \_\_\_\_\_ Age \_\_\_\_\_

Judo Club \_\_\_\_\_ Rank \_\_\_\_\_

Card #(USJI, USJA, USJF) \_\_\_\_\_ Expiration Date \_\_\_\_\_

USA Citizen? Yes No Foreign Athlete Judo Passport # \_\_\_\_\_

**I certify that all above information is correct.**

**Signature: \_\_\_\_\_ (Contestant 18+ or Parent/Guardian)**

### *Please note:*

1. It is mandatory that the waiver of liability be signed in order to participate.
2. Anyone failing to fill out the necessary forms can be disqualified from the tournament

**It is mandatory that all non-black belt competing in Nikkyu & above, Masters, Youth, Visually Impaired and Senior Female Divisions complete certification below:**

I, \_\_\_\_\_, a Judo Instructor, who has been awarded the Judo rank of Shodan or higher, under the auspices of United States Judo Inc., United States Judo Association, and/or United States Judo Federation, 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 the Virginia Commonwealth Games at Liberty University.

**A copy of my rank (rank certification or my USJI membership card having the verification symbol "V" printed following my rank) is attached. Competitors in the below categories can be disqualified without instructor's rank verification.**

Signature of Judo Instructor \_\_\_\_\_ Rank \_\_\_\_\_

**DIVISION – PLEASE CHECK BESIDE****ENTRY FEES**

**BOYS:** 5-6 \_\_\_\_\_ 7-9 \_\_\_\_\_ 10-12 \_\_\_\_\_ 13-16 \_\_\_\_\_ 17-19 \_\_\_\_\_ ENTRY FEE \$ \_\_\_\_\_  
WEIGHT CLASS: \_\_\_\_\_ WEIGHT IN POUNDS – **NO ARM-BARS WILL BE ALLOWED IN ANY NOVICE CATEGORIES**

**GIRLS:** 5-6 \_\_\_\_\_ 7-9 \_\_\_\_\_ 10-12 \_\_\_\_\_ 13-16 \_\_\_\_\_ 17-19 \_\_\_\_\_ ENTRY FEE \$ \_\_\_\_\_  
WEIGHT CLASS: \_\_\_\_\_ WEIGHT IN POUNDS – **NO ARM-BARS WILL BE ALLOWED IN ANY NOVICE CATEGORIES**

**MASTERS – M:** 30-39 \_\_\_\_\_ 40-49 \_\_\_\_\_ 50 & OVER \_\_\_\_\_ ENTRY FEE \$ \_\_\_\_\_  
WEIGHT CLASS: \_\_\_\_\_ WEIGHT IN POUNDS

**MASTER – F:** 30-39 \_\_\_\_\_ 40-49 \_\_\_\_\_ 50 & OVER \_\_\_\_\_ ENTRY FEE \$ \_\_\_\_\_  
WEIGHT CLASS: \_\_\_\_\_ WEIGHT IN POUNDS

**SENIOR NOVICE – F:** \_\_\_\_\_ ENTRY FEE \$ \_\_\_\_\_  
WEIGHT CLASS: \_\_\_\_\_ WEIGHT IN POUNDS

**SENIOR – F:** \_\_\_\_\_ ENTRY FEE \$ \_\_\_\_\_  
WEIGHT CLASS: \_\_\_\_\_ WEIGHT IN POUNDS

**VISUALLY IMPAIRED – M:** \_\_\_\_\_ ENTRY FEE \$ \_\_\_\_\_

**NEW VISUALLY IMPAIRED F:** \_\_\_\_\_ ENTRY FEE \$ \_\_\_\_\_

**SENIOR M:** SANKYU & BELOW \_\_\_\_\_ NIKKIYU & ABOVE \_\_\_\_\_ ENTRY FEE \$ \_\_\_\_\_  
WEIGHT CLASS: \_\_\_\_\_ WEIGHT IN POUNDS

**KOSEN** – (BOYS OVER 12 YEARS OLD – GIRLS OVER 12 YEARS OLD) ENTRY FEE \$ \_\_\_\_\_  
**NO ARM-BARS WILL BE ALLOWED IN ANY NOVICE CATEGORIES**

KOSEN MASTERS M/F – SENIOR M/F) ENTRY FEE \$ \_\_\_\_\_

KATA FEE - ENTRY FEE \$ \_\_\_\_\_  
ENTRY FEE TOTAL \$ \_\_\_\_\_

TOTAL \$ \_\_\_\_\_



**Don't forget to sign – Certification & Release and Waiver of Liability**

## Release and Waiver of Liability

I am aware that during my participation and attendance at the Virginia Commonwealth Games at Liberty University ("Games") and related services and activities, Virginia Amateur Sports, Inc and its agents, employees and associates ("Sponsor") will be providing various facilities and arrangements for the Games, and that certain risks and dangers may arise, including but not limited to hazards inherent in the sport (s) in which I will be training, preparing or competing; negligent or other careless acts and omissions by other participants, spectators and the Sponsor; and hazards or dangerous conditions of the facilities and grounds used as a part of the Games. Participant includes players, coaches, managers, staff members, team workers, referees, officials, scorekeepers, and all other personnel including but not limited to media personnel permitted to enter any restricted areas which are defined as those areas restricting access to general public spectators.

In consideration of the acceptance of my entry by the Sponsor and the right granted to me to participate in and attend the Games and related activities, I do hereby assume all the above risk, and agree that, in the event of an injury to me as a result of an accident which occur during my involvement and participation of the Games, my recovery against the Sponsor, shall be limited to a claim for medical expenses incurred as a result of the injury, and only to the extent that such medical expenses are not otherwise covered or paid by my insurance coverage, medical or otherwise. Furthermore, for this consideration, I agree to present my claim for the personal injury to the Sponsor within six (6) months from the date of injury; if I fail to do so, I agree that I will have waived any and all right I have to recover against the Sponsor for said injury.

Additionally, in consideration and acceptance of my entry by the Sponsor and the right to participate in and attend the Games and related activities, I consent to receive any and all emergency medical treatment as may be deemed appropriate under the existing circumstances as then determined by the Sponsor or its agents. I also grant Virginia Amateur Sports, Inc. permission to use likeness, voice, and words in television, radio, film, or in any form to promote activities of the Virginia Commonwealth Games at Liberty University. I also understand that there will be no refunds.

Participants Signature \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

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**(Following portion pertains only to parent or guardian of a participant who is 17 years of age or younger)**

I have read and consent to the above limitations on recovery and agree on my and my child's behalf that any recovery against the Sponsor for injury arising as a result of an accident which occur during my child's involvement and participation in the Games, should said injury occur due to the negligence of the Sponsor, shall be limited to a claim for medical expenses incurred as a result of said injury, and only to the extent that such medical expenses are not otherwise covered or paid by my child's insurance coverage, medical or otherwise. Furthermore, for this consideration, I agree to present any claim for personal injury to my child to the Sponsor within six (6) months from the date of injury; if I or my child fail to do so, I agree that I will have waived any and all right I have to recover against the Sponsor for said injury. **No arm-bars will be allowed in any novice categories.**

Additionally, in consideration and acceptance of my child's entry by the Sponsor and the right to participate in and attend the Games and related activities, I consent that my child receive and all emergency medical treatment as may be deemed appropriate under the existing circumstances as then determined by the Sponsor or its agents. I also grant Virginia Amateur Sports. Permission to use my child's likened, voice, and words in television, radio, film, or in any form to promote activities of the Virginia Commonwealth Games at Liberty University. I also understand that there will be no refunds.

Parents/Guardian Signature (If participant is 17 years of age or younger)

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_