

2009 CAPITAL OPEN

SACRAMENTO JUDO CLUB, INC. 74 Year ANNIVERSARY INVITATIONAL TOURNAMENT

Your Judo Club is cordially invited to participate in the 2009 Capital Open Judo tournament sanctioned by the United States Judo Federation (# 09-10-06). The Sacramento Judo Club, Inc., Hokka Yudanshakai and Cosumnes River College look forward to your participation.

DATE: Sunday, October 11, 2009 **LOCATION:** Cosumnes River College
START: 10:00 AM 8401 Center Parkway
Sacramento, California 95823

ELIGIBILITY: All individuals with current USJF, USJI, or USJA registration card (Must present valid card at time of registration) USJA members must also present proof of Insurance. If a contestant is unable to present their valid registration card, he or she will be required to purchase a membership of one of the three organizations at the tournament site. Responsibility for reimbursement of membership fees for those who have previously registered remains that of the individual.

ENTRY FEE: The WALK-UP entry fee is \$30 per contestant, or \$55 for 2 contestants in the same immediate family (Junior & Youth siblings) or \$75 for 3 contestants in the same immediate family. Entry fee is payable at the time of registration. (Checks may be made payable to **Sacramento Judo Club**) If you wish to compete in another division or additional divisions, please see Tournament Director. A \$20 fee will be charged for all returned checks.

REGISTRATION & WEIGH-IN: **Junior and Intermediate Divisions** (5 to 14 years of age) 8:00 AM to 9:30 AM
Intermediate Division (15 & 16 years) and **Masters** (35+ years) Not later than 10:30 AM
Senior Men and Women (17+ years of age) Not later than 11:00 AM

OFFICIALS MEETING: 9:30 AM

FORMAT: Pool system in various age and weight categories to be determined by the Tournament Director to optimize competition and safety. All matches "Stop Time" clock stops on matte.

MATCH TIME: **3 MINUTES JUNIORS, INTERMEDIATES, SENIORS AND MASTERS**
5 MINUTES BLACK BELTS

CONTEST RULES: Current IJF Contest Rules Modified as follows:

1. No *Double Knee Drop Seoinage* will be allowed for contestants 12 years old and under.
2. No *Shime Waza* (choking techniques) for 12 years old and under. If a 12 year old or younger contestant is pooled with 13 years old or older contestants, choking techniques will not be allowed for all contestants in that pool.
3. *Kansetsu Waza* (Joint lock techniques) will be allowed in the Black Belt division only. **Sankyus, Nikyus and Ikkyus** may compete in this division if their black belt Judo instructor signs certificate regarding non-black belt contestants.
4. *Waki Gatame* will not be allowed from a standing position.
5. Injury Rule: Pre-2003 medical rules will be used except for the black belt division.
6. Golden Score will be used if there is a tied.

SCORING SYSTEM: Places will be determined according to the following criteria, in this order:

1. The most wins;
2. If the number of wins is tied, the most points;
3. If two contestants are tied in wins and points- then revert to result of head to head match; whoever won the match between them will be given the higher place or if the two contestants have not competed, they will be given the option to compete, if the sizes are not that different. If this situation arises and there is a question about this, consult with the Tournament Director;
4. In all other cases not covered by these rules, consult with the Tournament Director.

POINT SYSTEM: **IPPON- 5 PTS., WAZA ARI- 4 PTS., YUKO- 3 PTS., KOKA- 2 PTS., DECISION- 1 PT.**

AWARDS: Each pool will be awarded first, second and third places.

For Further Information or Clarification Contact:
Tournament Director: Mac Takeda at (916) 685-6751 or cell (916) 893-7080

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Sacramento Judo Club, Inc.
74 YEAR ANNIVERSARY INVITATIONAL TOURNAMENT

Sunday, October 11, 2009

Cosumnes River College
 8401 Center Parkway
 Sacramento, California 95823

OFFICIAL ENTRY FORM

(Please type or print)

This form must be approved and stamped by REGISTRATION before going to weigh-in.

Name			
	(first)	(mi)	(last)
Address			
	(number & street)	(city)	(state & zip)
	<input type="checkbox"/> USJF <input type="checkbox"/> USJI <input type="checkbox"/> USJA	Card Number	
		Expiration Date	

Date of Birth		Age	
Sex	<input type="checkbox"/> Male <input type="checkbox"/> Female	Judo Rank (belt color)	
Division	<input type="checkbox"/> Junior <input type="checkbox"/> Intermediate	Kyu	
(check one)	<input type="checkbox"/> Senior <input type="checkbox"/> Master	Dan	

Club/Dojo Name	
Sensei/Coach	
Number of months / years in judo	

Emergency Contact		Telephone #	
Address			

CERTIFICATE REGARDING NON-BLACK BELT CONTESTANTS

[to be completed if not a black belt(Sankyū, Nikyū or Ikkyū) completing in black belt division]

I, (name of instructor) _____, a Judo instructor who has been awarded the Judo rank Shodan or higher, under the auspices of the United States Judo, Inc., the United States Judo Federation, or the United States Judo Association hereby certify that (name of contestant) _____ although not having been awarded the rank of Shodan or higher, is of sufficient aptitude and skill in Judo to complete in the black belt division at the 2009 Capital Open Judo Invitation Tournament.

Signature of Judo Instructor	Print Name of Judo Instructor	Judo Rank	Date
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Signatures also required on back

WARNING!

WAIVER AND RELEASE OF LIABILITY AND AGREEMENT TO PARTICIPATE

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 ("Activity") of the **United States Judo Federation, Inc., USA Judo/United States Judo, Inc., United States Judo Association, Inc., Northern California Judo Association, Inc., California Judo, Inc., Los Rios Community College District, Cosumnes River College, and the Sacramento Judo Club**, I agree:

1. I understand the nature of Judo activities and believe I am qualified to participate in such Activity. I also understand the rules governing the sport of Judo.

2. I further acknowledge 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. I acknowledge and fully understand that I will be engaging in a contact sport that might result in serious injury, illness or disease, 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, inactions, 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 risks involved in the sport of Judo, I assume all such risks and accept personal responsibility for the damages following such injury, illness, disease, permanent disability, or death.

5. I hereby release, waive, discharge and covenant not to sue the **United States Judo Federation, Inc., USA Judo/United States Judo, Inc., United States Judo Association, Inc., Northern California Judo Association, Inc., California Judo, Inc., Los Rios Community College District, Cosumnes River College, and the Sacramento Judo Club**, together with their affiliated clubs, their respective administrators, directors, officers, agents, coaches, and other employees or volunteers of the organization, event officials, medical personnel, other participants, their parents, legal 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 "Releasees", from any and all litigation expenses, attorney fees, loss, liability, damage or costs on account of injury, illness, disease, including permanent disability and death or damage to property, caused or alleged to be caused in whole or in part by the negligent acts or omissions of the Releasees or otherwise to the fullest extent permitted by law.

I HAVE READ THE ABOVE WARNING, WAIVER, AND RELEASE, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND KNOWING THIS, SIGN IT VOLUNTARILY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE. 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/LEGAL GUARDIAN AS EVIDENCED BY THEIR SIGNATURE BELOW. I INTEND THIS TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THAT THE BALANCE, NOTWITHSTANDING SHALL CONTINUE IN FULL FORCE AND EFFECT.

Participant

Participant's Signature

Date

**FOR PARENTS/LEGAL GUARDIANS OF PARTICIPANTS OF MINORITY AGE
(UNDER AGE 18 AT TIME OF REGISTRATION)**

This is to certify that I, as parent/legal 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 including litigation expenses, attorney fees, loss, liability, damage or costs which may incur as the result of the minor child's 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

Parent/Legal Guardian's Signature

Date

Lodging Locations near 2009 Capital Open Tournament

Comfort Suites (near I-5)

2460 Maritime Drive
Elk Grove, California 95758
916-478-4000

Holiday Inn Express (near Highway 99)

9175 W. Stockton Blvd.
Elk Grove, California 95758
916-478-9000

Fairfield Inn and Suites Sacramento Elk Grove

8058 Orchard Loop Lane
Elk Grove, California 95624
916-681-5400
Toll Free- 1-877-933-5400

Hampton Inn & Suites

2305 Longport Court
Elk Grove, California 95758
916-683-9545

Hilton Garden Inn

9241 Laguna Springs Drive
Elk Grove, California 95758
916-691-1900

Extended Stay America (ESA)

2201 Longport Court
Elk Grove, California 95758
916-683-3753

Less expensive lodging located in Sacramento.