

Board of Directors: Toshio Ichinoe, Mark Hirota,
Rod Conduragis, Julie Koyama, Jack Elder,
Dick Middlebrooks, John Watters



OBUKAN
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Obukan Officers- **President:** Rod Conduragis,
V President: Mark Hirota, **Treasurer:** Jeff Luther,
Secretary: Jeff Rooney

7333 NE Fremont Street, Portland Oregon 97213 | obukanjudo@yahoo.com | 503 208-3035 | www.obukanjudo.org

2017- Mika Sugimoto Judo Clinic

Sponsored by Obukan Judo Dojo, Inc.

Sanctioned by the USJF (#17-08-17)

Clinic date: Saturday, August 05, 2017

Clinic Site: Obukan Judo Dojo, 7333 NE. Fremont St, Portland. OR 97213

Time: 10:00 AM – 3:00 PM

Registration: On-Line sign up at ObukanJudo.org or 9:00 AM to 9:45 AM on 8/5. Pay at the door.

Fee: \$40 (includes lunch). **NOTE- PLEASE RSVP BY JULY 29TH TO ENSURE THAT WE HAVE ENOUGH LUNCHES ORDERED**

Eligibility: Participants must have a current USJF, USA Judo or USJA membership card.













Information: Mark Hirota or Rod Conduragis
503-208-3035, obukanjudo@yahoo.com

Schedule

- 10:00 am – Noon: Clinic (Juniors and Seniors)
- 1:30 pm to 3:00 pm Training Camp



Mika Sugimoto

| Medal record | | |
|--|-----------------------|--------|
| Representing  Japan | | |
| Women's Judo | | |
| Olympic Games | | |
|  | 2012 London | +78 kg |
| World Championships | | |
|  | 2010 Tokyo | +78 kg |
|  | 2010 Tokyo | Open |
|  | 2008 Levallois-Perret | Open |
|  | 2011 Paris | +78 kg |
|  | 2011 Tyumen | Open |
| Asian Games | | |
|  | 2010 Guangzhou | +78 kg |
| Asian Championships | | |
|  | 2005 Tashkent | +78 kg |
|  | 2005 Tashkent | Open |
|  | 2008 Jeju | Open |
|  | 2004 Almaty | Open |

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ENTRY FORM
2017- Mika Sugimoto Judo Clinic
August 05, 2017, Sanctioned by the USJF (#17-08-17)

Participants's Name: _____

Address: _____

City: _____ State: _____ Phone: _____

Age: _____ Male: _____ Female: _____

Weight: _____ Rank: _____

Dojo/Club: _____

USJF, USA Judo or USJA Card Number: _____ Expiration Date: _____

In consideration of your accepting this entry, I, intending to be legally bound hereby for myself, my heirs, executors and administrators, waive the release any and all rights or damages that I may have against the Obukan Judo Dojo Inc. and the member clubs, officials and members of the Northwest Yudanshakai, or United States Judo Federation for any and all injuries suffered by me at said event.

Signature of Participant Date

Signature of Parent or Guardian (if under 18 years of age) Date

If assistance/accommodation is needed (check off appropriate box):

Vision loss / Blindness

Hearing Loss / Deafness

Type of assistance /accommodation requested or name of person assisting:

CERTIFICATE REGARDING NON-BLACK BELT PARTICIPANT

I, _____, a judo instructor who holds the judo rank of _____ (must be Shodan or higher) under the auspices of a nationally recognized Judo organization, hereby certify that, _____, a non-black belt competitor is competent to participate in the 2017 Mika Sugimoto Judo Clinic.

Instructor's Signature Date

Organization Registration Number Expiration Date

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., Northwest Judo Yudanshakai, Inc., and the Obukan Judo Dojo**, 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., Northwest Judo Yudanshakai, Inc., and the Obukan Judo Dojo**, 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