



**Judo Alberta
Female Only Training Camp
Registration Form
April 25 & 26, 2020**

Hosted by: Lethbridge Judo Club

2775 28 Ave S

Lethbridge, AB

Special Guest: Marti Malloy

(2012 Olympic USA Bronze Medalist)

Time: Saturday April 25, 2020 Check-in is from 12:30-1:00pm. Start time 1:0pm. Pick-up time is 12pm on Sunday April 26.

Registration:

- 1) \$40 per participant (this will include tournament fee, food, lodging, activities and gift)
- 2) \$25 per chaperone (If you are not a judoka but want to chaperone for the weekend)
- 3) Registration will be done online through Trackie:

TrackieReg.com/JAgirls2020

There are no age or belt restrictions so long as you are a member in good standing with Judo Alberta or another provincial judo association. Judo techniques and strategies will be presented from a female perspective. As well, this is a great opportunity for girls to get to know each other and spend some time with other female athletes.

Registration Deadline: Friday April 17, 2020

Please e-mail club registrations forms and any inquiries to: Mrst@telusplanet.net

Or call Tammy at: [\(780\) 717-1797](tel:7807171797)

Under 18 MINOR WAIVER FORM

Name _____ Club _____

RELEASE, INDEMNITY, WARRANTY, REGISTRATION AND ASSUMPTION OF RISK

In consideration of the acceptance of _____ (hereinafter referred to as "the said child") to compete in and/or being permitted to participate in the **2020 Female Training Camp** (hereinafter referred to as "this event"), I/we for myself/ourselves and for and on behalf of the said child hereby release, remise, and forever discharge and agree to indemnify and hold harmless the Alberta Kodokan Black Belt Association, **Lethbridge Judo Club** and their respective organizers, officers, executives, directors, officials, agents, servants, and representatives (hereinafter referred to as "the releases") from and against all claims, actions, costs, expenses, and demands in respect to death, injury, loss, or damage to the person or property of said child, or myself/ourselves, however caused, arising out of or in connection with the said child competing, or participating in this event and not withstanding that the same may have been caused by, contributed to or occasioned by the negligence, breach of contract, breach of common duty of care as an occupier of premise or otherwise, of or by the releases or any of them.

I/we agree to assume all risks, both known and unknown, and all consequences thereof, for myself/ourselves and for and on behalf of the said child, arising out of or in connection with said child competing or participating in this event.

I/we agree for myself/ourselves and for and on behalf of the said child to adhere to all rules, regulations and conditions of this event.

I/we hereby register the said child as a competitor or participant in this event and I/we certify that:

1. The said child is in good physical condition and has no injury, disease or disability that would impair his or her performance or physical condition or increase the likelihood of injury in competing or participating in this event.
2. No physician, nurse, therapist, trainer, coach, manager, or other person has advised me/us not to allow the said child to compete or participate in a body contact sport or in this event.
3. I/we am/are familiar with the sport of judo and the nature of a judo contest. I/we am/are aware that there is a risk of injury by the very nature of the sport.
4. We are the father and mother of the said child or the guardian(s) of the said child and the only person(s) lawfully entitled to act for and on behalf of the said child.

This document shall be binding upon the said child, myself/ourselves, the heirs, executors, administrators, assignees and personal representatives of each of us and the said child.

I/we have read this document and I/we agree that the said child and myself/ourselves are bound by its terms. I/we further understand that it is compulsory and mandatory that this document be fully completed and signed as a condition of precedent to the said child competing or participating in this event.

DATE SIGNED _____

SIGNATURES _____
(PARENT/GUARDIAN/FATHER) (PARENT/GUARDIAN/MOTHER)

(PRINT NAME)

(PRINT NAME)

INSTRUCTIONS: This form is to be completed for all persons under the age of 18 years by the following person(s):

- a. both natural parents of the child if living together
- b. both natural parents of the child if separated and no court order for custody has been granted
- c. both natural parents of the child if divorced and a court grants joint custody
- d. both the natural parent and the adopting parent of the child if married and if an adoption order has been granted
- e. both adopting parents of the child in an adoption order has been granted
- f. either the natural mother or the natural father of the child if divorced or separated and being the parent who has sole custody of the child by court order
- g. all guardians of the child whether appointed by court order or who are guardians by law
- h. the natural mother of the child if the child is illegitimate and no court order has been granted giving custody to anyone else

ADULT WAIVER FORM

Name _____ Club _____

RELEASE, INDEMNITY, WARRANTY, REGISTRATION AND ASSUMPTION OF RISK

In consideration of the acceptance of my to compete in and/or my being permitted to participate in the **2020 Female Training Camp** (hereinafter referred to as "this event"), I hereby release, remise, and forever discharge and agree to indemnify and hold harmless **Lethbridge Judo Club** and their respective organizers, officers, executives, directors, officials, agents, servants, and representatives (hereinafter referred to as "the releases") from and against all claims, actions, costs, expenses, and demands in respect to death, injury, loss, or damage to my person or property, however caused, arising out of or in connection with my competing, or participating in this event and notwithstanding that the same may have been caused by, contributed to or occasioned by the negligence, breach of contract, breach of common duty of care as an occupier of premise or otherwise, of or by the releases or any of them.

I certify that:

- 1) I am in good physical condition and I have no injury, disease or disability nor have I injected or ingested anything that would impair my performance or physical condition or increase the likelihood of injury in competing or participating in this event.
- 2) No physician, nurse, therapist, trainer, coach, manager, or other person has advised me not to compete or participate in a body contact sport or in this event.
- 3) I am familiar with the sport of judo and the nature of a judo contest. I am aware that there is a risk of injury by the very nature of the sport.

This document shall be binding upon myself, my heirs, executors, administrators, assigns and personal representatives

I have read this document and I understand it fully.

DATED SIGNED: _____

SIGNATURE _____ PRINT NAME _____



Female Training Camp Registration Form April 25 & 26, 2020

Surname: _____ **Name:** _____

Address: _____

City: _____ **Province:** _____

Postal Code: _____ **Phone:** _____

Date of Birth: _____ **Health Care #** _____

Any Medical Conditions:

***Emergency Contact #1:**

Name: _____ **Phone:** _____

Emergency Contact #2:

Name: _____ **Phone:** _____