



Be Strong, Courageous and Gentle

## Non-member Practice Participant Information Form

Today's Date: \_\_\_\_\_

### Participant Information:

Name (First, MI, Last) \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Sex  Male  Female

Cell Ph (if over 18): \_\_\_\_\_

Minor's Father/Guardian Name \_\_\_\_\_

Cell Ph: \_\_\_\_\_

Minor's Mother/Guardian Name \_\_\_\_\_

Cell Ph: \_\_\_\_\_

### Medical Issues/Physical Limitations:

Medical or physical problems that we should be aware of  
(i.e. Asthma, epilepsy, heart problems, medication, allergies, or any limiting problems):

\_\_\_\_\_

### Emergency Contact Information (if different from above):

Emergency Contact \_\_\_\_\_ Relationship \_\_\_\_\_

Home Ph: \_\_\_\_\_ Work Ph: \_\_\_\_\_ Cell Ph: \_\_\_\_\_

### Club Affiliation:

Dojo/Sensei \_\_\_\_\_ Current Rank \_\_\_\_\_ Yrs Experience \_\_\_\_\_

National Membership: USJF USJA ID# \_\_\_\_\_ Exp. \_\_\_\_\_

Please attach a copy of your current USJF/USJA card or send an electronic copy to:  
[honolulujudoclub@gmail.com](mailto:honolulujudoclub@gmail.com)



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## Honolulu Judo Club Waiver and Release of Liability

NAME OF PARTICIPANT \_\_\_\_\_ DATE \_\_\_\_\_

NAME OF PARTICIPANT'S PARENT(S) OR GUARDIAN(S) AUTHORIZED TO SIGN WAIVER FORM FOR PARTICIPANT: \_\_\_\_\_

CLUB: **HONOLULU JUDO CLUB**

PARTICIPATORY ACTIVITY: **TRAINING SESSIONS**

In consideration for 50<sup>TH</sup> STATE JUDO ASSOCIATION OF HAWAII, the HONOLULU JUDO CLUB, the CEDAR ASSEMBLY OF GOD of HONOLULU, and GS INDUSTRIES, acceptance of my entry and for allowing me to participate in the Participatory Activity, I do hereby for myself, the Participant, my heirs, executors, and administrators waive, release, and absolutely and forever discharge the 50<sup>TH</sup> STATE JUDO ASSOCIATION OF HAWAII, the HONOLULU JUDO CLUB, the CEDAR ASSEMBLY OF GOD of HONOLULU, GS INDUSTRIES and their respective officers, agents, representatives, successors, and assigns from and on account of any and all rights and claims for injuries of any kind whatsoever up to and including death, obligations, controversies, actions, causes of actions, liability and liabilities, demands, losses and damages (hereinafter collectively "Damages") which may be sustained and suffered as a result of any association with and/or entry in the Participatory Activity, including but not limited to any and all Damages arising out of traveling to, participating, and/or returning from such Participatory Activity.

I further understand and agree that the nature, extent and results of injuries, damages and losses resulting from participation in the Participatory Activity may not be known and anticipated, and the waivers and releases herein cover and are intended to cover all of the injuries, damages and losses resulting from said activities whether or not known or anticipated at this time.

And for the foregoing consideration I hereby covenant and agree to indemnify, defend and forever hold harmless 50<sup>TH</sup> STATE JUDO ASSOCIATION OF HAWAII, the HONOLULU JUDO CLUB, the CEDAR ASSEMBLY OF GOD of HONOLULU, GS INDUSTRIES and their respective officers, agents, representatives, successors, and assigns against any and all liability, cost and expense resulting from any claim, demand, suit, action or cause of action (including claims of workers' compensation insurers, temporary disability insurers, medical insurers and no-fault insurers) which may be asserted by and/or on behalf of any person for injury or damage sustained by myself and/or the Participant arising directly out of the Participating Activities.

IN WITNESS WHEREOF, these presents have been duly executed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Participant's Name

\_\_\_\_\_  
Parent/Legal Guardian

\_\_\_\_\_  
Participant's Signature

\_\_\_\_\_  
Parent/Legal Guardian's Signature (by signing above, you represent that you have the authority to sign for yourself and to bind the Participant to the terms herein).

## **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., 50<sup>th</sup> State Judo Association, Inc., Honolulu Judo Club, Cedar Assembly of God and GS Industries** 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, including United States Judo Federation, together with their affiliated club, 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 (Releasees), 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., 50<sup>th</sup> State Judo Association, Inc., Honolulu Judo Club, Cedar Assembly of God and GS Industries**, 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
<b>FOR PARENTS/LEGAL GUARDIANS OF PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT TIME OF REGISTRATION)</b>		

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
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# GRANT OF PUBLICITY RIGHTS & RELEASE OF CLAIMS

*Please use one form per person.*

I, the undersigned, hereby give **Honolulu Judo Club** and its agents, employees, successors, assigns, affiliates, and licensees, the full and unrestricted right and permission, in perpetuity and throughout the world, to use my name and/or likeness without previous notification or compensation. This right is granted to any and all uses of my name and/or likeness, whether captured by photograph, video, audio recording, or any other method, for any lawful purpose, including, but not limited to, publicity, advertising, and community education, and in any manner or format, including, but not limited to, printed materials, audio/video productions, and online formats (including email, websites, social media, and mobile marketing).

I hereby release, acquit, and forever discharge **Honolulu Judo Club** and its officers, directors, employees, agents, affiliates, and licensees from and against any and all claims, actions, causes of action, and liability, of any kind or nature, arising out of any use of my name, likeness, or voice in any lawful manner pursuant to this document.

I waive any right to pre-approve or review any use of my name, likeness, or voice by **Honolulu Judo Club** pursuant to this document.

I understand and agree that this Grant of Publicity Rights & Release of Claims will be construed in accordance with the laws of the State of Hawaii and the United States of America and that if any portion of this Grant of Publicity Rights & Release of Claims is held to be invalid, the balance shall continue in full force and effect.

**I AM 18 YEARS OF AGE OR OLDER**    **YES**                       **NO\***

NAME (PRINT) \_\_\_\_\_

ADDRESS \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

HONOLULU JUDO CLUB WITNESS/AGENT (PRINT NAME) \_\_\_\_\_

WITNESS/AGENT TITLE \_\_\_\_\_

\*If the person signing is under 18, consent must be given by a parent or legal guardian as follows:

I hereby certify that I am the parent or legal guardian of the above-named minor. I have read and understand this Grant of Publicity Rights & Release of Claims, and do hereby give my consent, without reservations, to the foregoing on behalf of the above-named minor.

PARENT / LEGAL GUARDIAN NAME (PRINT) \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

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**PLEASE EXCLUDE THE FOLLOWING:**

NAME (PRINT) \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

PARENT / LEGAL GUARDIAN NAME (PRINT) \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_



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## COVID-19 LIABILITY WAIVER

PARTICIPANT NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

I acknowledge the contagious nature of the Coronavirus/COVID-19 and that the CDC and many other public health authorities still recommend practicing social distancing.

I further acknowledge that Honolulu Judo Club has put in place preventative measures to reduce the spread of the Coronavirus/COVID-19.

I further acknowledge that Honolulu Judo Club cannot guarantee that I will not become infected with the Coronavirus/Covid-19. I understand that the risk of becoming exposed to and/or infected by the Coronavirus/COVID-19 may result from the actions, omissions, or negligence of myself and others.

I voluntarily seek services provided by Honolulu Judo Club and acknowledge that I am increasing my risk to exposure to the Coronavirus/COVID-19. I acknowledge that I must comply with all set procedures to reduce the spread while attending practice.

I attest that:

- I /My child will not attend practice if experiencing any symptom of illness such as cough, shortness of breath or difficulty breathing, fever, chills, muscle pain, headache, sore throat, upset stomach, or nausea/vomiting.
- I /My child will not attend practice if diagnosed with or tested positive for Coronavirus/COVID-19 and not yet cleared as non-contagious according to local public health regulations.
- We are following all CDC recommended guidelines as much as possible and limiting my/our exposure to the Coronavirus/COVID-19.

I hereby release and agree to hold Honolulu Judo Club harmless from, and waive on behalf of myself/my child any and all causes of action, claims, demands, damages, costs, expenses and compensation for damage or loss to myself/child that may be caused by any act, or failure to act of the Judo Club, or that may otherwise arise in any way in connection with any services received from Honolulu Judo Club, its instructors and its agents from any liability or claim that I/my child may have against the Judo Club with respect to any bodily injury, illness, death, medical treatment, or property damage that may arise from, or in connection to, any services received from Honolulu Judo Club. This Liability waiver and release extends to the Judo Club with all owners, partners, and employees.

PRINT PARENT NAME: \_\_\_\_\_ (PLEASE PRINT CLEARLY)

PARENT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PARTICIPANT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_