

JUDO SEMINAR FEATURING OLYMPIC & 3X WORLD CHAMPION **ILIAS ILIADIS**

SUNDAY, OCTOBER 11TH, 2015

Clinician:

Ilias Iliadis - Greece
2004 Olympic Champion (-81kg)
2012 Olympic Bronze Medalist (-90kg)
2010 World Champion (-90kg)
2011 World Champion (-90kg)
2014 World Champion (-90kg)
2005 World Silver Medalist (-90kg)
2007 World Silver Medalist (-90kg)
2013 World Bronze Medalist (-90kg)

Sponsored By:

Dojo Outfitters

Hosted By:

Portland Judo, Ippon Judo, NW Yudanshakai, & Tacoma South Sound Sports

Sanctioned By:

United States Judo Federation, Sanction Number: 15-10-16

Venue Address:

Pierce Community College (Fort Steilacoom Campus)
9401 Farwest Drive
Lakewood, Washington 98498

Seminar Fee:

\$80 USD (18 +) Pre-Register (PortlandJudo.Com) PayPal ONLY!
\$60 USD (Under 17) Pre-Register (PortlandJudo.Com) PayPal ONLY!
\$120 USD (ALL NON-REGISTERED WALK-UPS)
\$20 Discount, Refunded at the Seminar for Rainier Cup Competitors ONLY!

Eligibility:

Open to USJF, USJA, USA Judo, & Judo Canada. All Participants MUST
Show a Current USJF, USJA, USA Judo, or Judo Canada Card to Participate.

Schedule:

7am to 8am: Registration for All Participants.
8am to 11am: Seminar for All Participants.
11am to 12pm: Picture and Autograph Session.
The Seminar Will Consist of Warm-Ups, Katamewaza, Nagewaza, and Randori.

Hotel Accommodations:

Hampton Inn & Suites Tacoma Mall
8203 South Hosmer Street
Tacoma, Washington 98408
Phone: (253) 539-2288
Judo Rate: \$114 USD (Free Continental Breakfast, Wi-Fi, & Parking)
Code Name: Judo (Deadline is Friday, October 9th, 2015)

2015 ILIAS ILIADIS SEMINAR

SUNDAY, OCTOBER 11TH, 2015

USJF SANCTION NUMBER: 15-10-16

OFFICIAL ENTRY FORM



Name: _____
(Please Print) **First** **MI** **Last**

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone: _____ **Emergency Contact Number:** _____

Dojo/Club/Team: _____ **Belt Color:** _____

Circle One
USJF USJI USJA Judo Canada # _____ **Expiration Date** _____

If Assistance/Accommodation is Needed (Check off Appropriate Area):

Vision/Blindness **Hearing Loss/Deafness**

Type of Assistance/Accommodation Requested or Name of Person Assisting:

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., Ippon Judo Dojo, Inc., Pierce College (Ft. Steilacoom Campus), Tacoma South Sound Sports, City of Lakewood, and Pierce County, 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., Ippon Judo Dojo, Inc., Pierce College (Ft. Steilacoom Campus), Tacoma South Sound Sports, City of Lakewood, and Pierce County, 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