

SIXTY-SIXTH ANNUAL
PALO ALTO JUDO CLUB, INC.
INVITATIONAL TOURNAMENT
NOVEMBER 10, 2019
MENLO-ATHERTON HIGH SCHOOL
Ayers Gymnasium
555 Middlefield Road Atherton CA

Sanction: USJF: 19-11-13

OFFICIAL USE ONLY – DO NOT WRITE INSIDE THIS BOX

WEIGHT

OFFICIAL ENTRY FORM

Please enter information in all applicable fields. INCOMPLETE FORMS WILL NOT BE PROCESSED!

NAME: _____
Last First MI

BIRTHDATE: ____/____/____ AGE: ____ GENDER: MALE FEMALE
Month Day Year DIVISION: JUNIOR <13 INTERMEDIATE 13-16 SENIOR >16

BELT COLOR: _____ (Brown and Black belts MUST check a rank below)

Brown Rank: SANKYU NIKYU IKKYU
Black Rank: SHODAN NIDAN SANDAN YONDAN GODAN OR HIGHER

CHECK TO COMPETE IN BLACK BELT POOL IF NOT A BLACK BELT:

CHECK IF THIS IS YOUR FIRST TOURNAMENT:

CELL NUMBER AT TOURNAMENT (in case we have questions about your entry): _____

CLUB/DOJO NAME: _____

SENSEI/COACH: _____ SENSEI/COACH CELL NUMBER: _____

CONTESTANT ADDRESS: _____
Street City State Zip

USJF NO: _____ USJI NO: _____ USJA NO: _____ EXPIRATION DATE: _____

EMERGENCY CONTACT NAME: _____

EMERGENCY CONTACT PHONE NUMBER: _____

If assistance/accommodation is needed, check appropriate box: Vision Loss/Blindness Hearing Loss/No Hearing

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

Certificate Regarding Non-Black Belt Contestants

I, _____
(Print name of Judo Instructor)

a Judo instructor, who has been awarded the Judo rank of Shodan or higher, under the auspices of the USJI, USJF, USJA, or a Nationally recognized Judo organization hereby certify that,

_____,
(Print name of contestant)

although not having been awarded the Judo rank of Shodan or higher, is of sufficient aptitude and skill in Judo to compete in this competition.

Signature of Judo Instructor _____ Date _____

Rank _____ Organization rank obtained through _____