



HOST:	Texas A&M University Judo Team		
DATE:	Saturday, March 2, 2024		
LOCATION:	Physical Education Activity Building (PEAP) 632 Penberthy Road Texas A&M University - College Station, Texas 77843		
SANCTION:	USA Judo		
WEIGH-IN:	Registration and Weigh-In - PEAP Friday, March 1 7:00 pm – 8:00 pm Saturday, March 2 8:00 am – 9:00 am		
COMPETITION:	Saturday, March 2, 2024 Begins at 9:30 am		
REGISTRATION:	ALL COMPETITORS MUST PRE-REGISTER https://forms.gle/DzVx9GXMqvtYS9kk7		
	\$25.00 first division \$10.00 for second division		
	Green belt and below can compete in the Novice and Elite division Brown Belt and higher can only compete in the Elite division		
	REFUNDS WILL BE PROVIDED IF COMPETITOR CAN NOT ATTEND BUT A \$5.00 SERVICE FEE WILL BE DEDUCTED FROM REFUND		
ELIGIBILITY:	USA Judo Members Must provide proof of full-time enrollment Any FULL-TIME student is eligible for the 2024 NCJA SW Regional Championships. This includes undergraduate and graduate students <i>but the individual must not have</i> <i>competed in more than 4 NCJA Regional or 4 NCJA Championships.</i>		
MEDICAL:	Texas A&M University Emergency Medical Technicians		
MATCH TIMES:	3 minutes – Novice 4 minutes – Elite		
Divisions:	Novice, Elite Males: 60kg, 66kg, 73kg, 81kg, 90kg, 100kg, +100kg Females: 48kg, 52kg, 57kg, 63kg, 70kg, 78kg, +78kg		
	Novice and Senior Gold Medal athletes from a registered NCJA institution are eligible for the 2024 NCJA Championships \$50 discount.		





RULES:

Elite 4 minutes Novice 3 minutes

IJF RULE MODIFICATIONS. Competitors are required to bring their own white

and blue belts. All competitors must have at least a white gi and are encouraged to bring a blue gi as well. A match between two competitors with blue gis will not be permitted.

JUDOGI – Article 3 – Is modified to use the pre-2014 gi fit requirements to be applied within reason based upon the size of the player. No hansoku-make will be given for the first violation and the player will be given the opportunity to change gis, even if the contest has started.

MAAPP Policy The Center for SafeSport has developed the Minor Athlete Prevention Policies (MAAPP) which USA Judo has adapted to our own sport. The MAAPP is a collection of proactive and training policies comprised of two parts; Education & Training Policy that requires training for certain Adult Participants and the Required Prevention Policies, focused on limiting one-on-one interactions between Adult Participants and Minor Athletes to prevent abuse. The full MAAPP policy can be found at <u>www.usjudo.org</u>

Method:	Modified Double elimination 6 or more Round Robin for 5 or less competitors Tournament Directors may adjust weight categories, divisions, and brackets if necessary			
DIRECTOR:	Bob Perez Dan Gomez Ren Uyehara	979-218-4582 832-545-4522	<u>bobperez@tamu.edu</u> <u>tamujudo@gmail.com</u> ruyehara@tamu.edu	
WEBSITE:	http://www.aggi	http://www.aggiejudo.com		
Email:	aggiejudo@tamu.edu			

We do not have a host hotel. PEAP Google Map Click here - 632 Penberthy Road - College Station, Texas





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, the 2024 NCJA SW Regional Championships, and related events and activities of United States Judo, Inc., United States National Collegiate Judo Association, Texas A&M University, Texas Judo Inc., Texas A&M Department of Recreational Sports, Texas A&M Judo and its officers, I hereby:

1. Acknowledge that I am familiar with the sport of Judo and understand the rules governing the sport of Judo.

2. Agree 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. Acknowledge and fully understand that I will be engaging in a contact sport that might result in serious injury, including permanent disability, or death, and severe social and economic losses due to not only 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 caused by, arising out of, resulting from or following such injury, permanent disability, or death.

5. Release, waive, discharge and covenant not to sue the United States Judo, Inc., the United States Olympic Committee, United States National Collegiate Judo Association, Texas A&M University, Texas Judo Inc., Texas A&M Department of Recreational Sports, Texas A&M Judo and its officers, together with their affiliated clubs, Tournament Director, Tournament Organizers, Tournament Staff, their respective administrators, directors, agents, coaches and other employees or volunteers of the organization, event officials, medical personnel, other participants, their parents, guardians, supervisors and coaches, sponsoring agencies, sponsors, advertisers, and if applicable, owners, lessors, and lessees of premises used to conduct the event, all of whom are hereinafter referred to as "releasee", from any and all claims, demands, losses, or damages on account of injury, including permanent disability and death and damage to property, caused or alleged to be caused in whole or in part by the negligence of the releasee or otherwise to the fullest extent permitted by law.

I HAVE READ THE ABOVE WARNING, WAIVER AND RELEASE, UNDERSTAND THAT I GIVE UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND KNOWING THIS, SIGN IT VOLUNTARILY. I AGREE TO PARTICIPATE KNOWING THE RISK 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/GUARDIAN AS EVIDENCED BY THEIR SIGNATURE BELOW.

Participant's Printed Name

Participant's Signature

Date

FOR PARENTS/GUARDIANS OF PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT TIME OF REGISTRATION)

This is to certify that I, as parent/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 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.

Participant's Printed Name

Participant's Signature

Date





TALENT RELEASE

1. I authorize Texas A&M University and its agents to photograph, videotape, audio record, televise, duplicate, and/or otherwise record my image, voice, and likeness. I understand that Texas A&M will own these recordings.

2. I irrevocably authorize Texas A&M and its agents to use, display, publish, and distribute these recordings for any purpose on websites, publications, broadcasts, displays, and any other medium, and to offer thesrecordings to others for use in non-university mediums.

3. I waive any right to inspect or approve these recordings or material that may be used with them now or in the future, whether that use is known to me or not.

4. I waive any and all claims I may have against Texas A&M, its regents, employees, and agents ("releasees") arising out of the use of these recordings, including but not limited to any claims arising out of my right of privacy or right of publicity and any claims based on any distortions, optical illusions, or faculty mechanical reproductions, including injuries sustained as a result of the sole, joint, or concurrent negligence, gross negligence, negligence per se, statutory fault, intentional torts, or strict liability of releasees.

5. I understand that I will not be compensated for any use of these recordings.

6. I understand that this is a legal document and represent that I have read it and understand it and am signing it voluntarily.

Signature	Date
Printed Name	Cell Phone
Email Address	Expected Graduation (If Applicable)
Permanent Address	
If under age 18, a parent or guardian must com	plete the following:
Parent/Guardian Signature	Date
Parent/Guardian Printed Name	Relationship
Parent/Guardian	Address