



San Gabriel Judo & Riverside Youth Judo



proudly hosts the

8th Annual Fight for the Cure

All-Star Judo Clinic

Saturday, October 11, 2025

4yo to 11yo: 10am to 12pm

12yo to Seniors: 2pm to 4pm

5019 Encinita Ave, Temple City, Ca 91780

\$50

Donation

per Person

Free to those

competing in the

Tournament the next day!



Marti Malloy



Megumi Ishikawa



Jasmine Macias



In Conjunction with the 8th Annual Fight for the Cure Women's Breast & Ovarian Cancer Shiai
Sunday, October 12, 2025 at Riverside Convention Center, Riverside, Ca

2025 8TH ANNUAL FIGHT FOR THE CURE ALL-STAR JUDO CLINIC

ENTRY FORM

United States Judo Association Sanction #25-043

Please print or type.

Name of Participant:

FIRST _____ MIDDLE _____ LAST _____
☐ Male ☐ Female Date of Birth _____ Age: _____ Rank/Belt Color: _____
DAY MONTH YEAR

Address _____
NUMBER AND STREET

CITY _____ STATE _____ ZIP _____

HOME TELEPHONE _____ MOBILE TELEPHONE (Event specific info may be text messages may be sent to this phone number) _____

FAX _____ E-MAIL _____

USJA# _____ USJF# _____ USA Judo # _____ Exp Date: _____

Name of Judo club _____

Name of Head Instructor _____

E-MAIL

Emergency Contact _____

PHONE & E-MAIL

Address _____
NUMBER AND STREET

CITY _____ STATE _____ ZIP _____

Please select a Clinic Session:

☐

**4YO to 11YO
10AM TO 12PM**

OR

☐

**12YO TO SENIOR
2PM TO 4PM**

COMPLIMENTARY FOOD, BEVERAGES & MUSIC WILL BE AVAILABLE FOR EVERYONE FROM 4PM TO 6. PLEASE STAY & ENJOY THE COMPANY.

IF ASSISTANCE/ACCOMMODATION IS NEEDED (Check appropriate box):

☐ Vision Loss / Blindness

☐ Hearing Loss / Deafness

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

For Official Use Only:

☐ \$50 DONATION for 1 PARTICIPANT

☐ \$40 for Immediate Family Member

Total Amount Due: _____

Name of Immediate Family Member Participant

☐ Cash ☐ Check; Check # _____

Name of Immediate Family Member Participant

Official use only

2025 8TH ANNUAL FIGHT FOR THE CURE ALL-STAR JUDO CLINIC

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 Association, Inc., San Fernando Valley Judo Club, San Gabriel Judo Club, San Gabriel Japanese Community Center, and the officers, employees, volunteers, and agents, 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 Association, 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 (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 Association, San Fernando Valley Judo Club, San Gabriel Judo Club, and the San Gabriel Japanese Community Center, 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