

NEW YORK OPEN 2007

The Twenty Fourth Annual New York Open Judo Championship "C" LEVEL POINT TOURNAMENT

Contest Date	Saturday, March 10, 2007
Location	New York Athletic Club, 180 Central Park South (corner of 58 th Street and 7 th Avenue) New York, NY 10019
Sanctioned By	USJI
Eligibility	Any adult male judoka with the senior rank of nkyu or above, with proof of current USJA, USJF or USJI membership (U.S. players). Judokas must present current card at registration, as well as proof of age. Non-U.S. players must present passport and country judo affiliation card . Blue & white gi's are required.
Awards	1 st – 2 nd – 3 rd place New York Open 2007 awards for each weight division. Note: Two third places will be awarded.
Prize Money	\$1000 awarded to each of the 1 st place winners
Entry Fee	\$65.00 per person if completed application and payment are received before February 10, 2007. \$90.00 if received afterwards. There will be NO REFUNDS. Registration is not complete until payment is received.
Spectator Fee	\$20.00 collected at the door
Rules	IJF Rules, Repechage scoring system, 5-min. matches. Texas Match System will be used. For categories of five (5) competitors or less: Round Robin Pool (every competitor competes against every other competitor) will be used.
Divisions	Male: (kg) 60, 66, 73, 81, 90, 100, HWY
Registration	ALL COMPETITORS MUST REGISTER & WEIGH-IN ON FRIDAY, March 9, 2007 at the New York Athletic Club (7 th Floor), from 15:00 to 19:00. Scales will be available to check weight from 15:00 to 17:00. If you fail to register on Friday, you will not be allowed to compete!
Official Weigh-In	Friday, March 9, 2007, 17:00-19:00 at the New York Athletic Club, 7 th floor.
Start Time	Contest begins promptly at 7:30 AM, Saturday March 10, 2007
Competition Managers	Mel Appelbaum, PhD, Arthur Canario MD, John Walla
Chief Referee	Rick Celotto, IJF-A

Tournament Hotel	<p>Pickwick Arms Hotel 230 East 51 St. New York, NY 10022</p> <p>Phone 212.355.0300 Fax. 212.755.5029 Toll Free US: 800-742-5945 Canada: 800-874-0074</p> <p>Email: info@pickwickarms.com Web Site: www.pickwickarms.com</p> <p>Be sure to ask for New York Open Judo special rates.</p>
Other Area Hotels	<p>Wolcott Hotel 4 West 31 St (between 5th Ave & Broadway) New York, NY 10001 Tel (212) 268-2900 Fax (212) 563-0096 E-mail: sales@wolcott.com Website: www.wolcott.com</p> <p>West Side YMCA, 5 West 63rd St., New York, NY 10023 Tel (212) 875-4273, Fax (212) 875-1334</p> <p>Vanderbilt YMCA, 224 East 47th St., New York, NY 10017 Tel (212) 756-9600, Fax (212) 752-0210</p> <p>See http://www.ymcanyc.org for information about the branches of the YMCA offering accommodation in the New York metropolitan area.</p>
Website	<p>Additional information, as well as on-line versions of, this document is available at http://www.NewYorkOpenJudo.com</p>
CONTACT	<p>For additional information please contact:</p> <p><u>Mel Appelbaum, Ph.D., Tournament Director</u> (973) 543-7102 Tel/Fax E-mail: middiemd@aol.com</p> <p><u>John Walla, Registration Chairman</u> (800) 223-0270, Extension 6475 Monday-Friday (9:00 am-5 pm EST)</p>

NY OPEN 2007 Entry Form

March 10, 2007

Deadline for pre-registration is February 10, 2007

Fee	\$65.00 if received on or before February 10, 2007 \$90.00 if received after February 10, 2007
Checklist	<ol style="list-style-type: none"> 1. Completed Entry form 2. Signed Waiver 3. Check for \$65 (\$90 after February 10) made out to <i>New York Open Judo</i> 4. Completed Black belt form (for non-black belts) 5. Completed Parental Waiver (for those under 18 years of age)¹ 6. Mail package to Richard Furlin, Treasurer, 201 West 70th St., Apt 6E, New York, NY 10023 USA

Please complete registration form below

***YOU ARE NOT CONSIDERED PRE-REGISTERED UNLESS THE APPLICATION AND PAYMENT ARE RECEIVED BY FEBRUARY 10, 2007.**

SURNAME (LAST NAME)	FIRST NAME (GIVEN NAME)
ADDRESS	CITY
STATE	COUNTRY
ZIP/POSTAL CODE	BIRTH DATE (DD/MM/YYYY)
PASSPORT #	USJA/USJF/USJI ²
CLUB	TEL NO
WEIGHT DIVISION (60,73,81,90,100, 100+)	FAX NO
JUDO GRADE (MINIMUM RANK IS NIKYU)	E-MAIL ³
ENTRY FEE: (\$65 if received before February 10, 2007, \$90 afterwards)	

¹ Players less than 18 years of age require approval of the tournament director to compete.

² Required for US players

³ Include email address if you want to have a confirmation sent to you.

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 of United States Judo, Inc., United States Judo Federation, United States Judo Assoc., New York State Judo Inc., and New York Athletic Club, 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 following such injury, permanent disability, or death.
5. Release, waive, discharge and covenant not to sue the United States Judo, Inc. United States Judo Federation, United States Judo Association, New York State Judo Inc., New York Athletic Club, together with their affiliated clubs, 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 WHO ARE MINORS (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.

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Parent/Guardian's Printed Name	Parent/Guardian's Signature	Date
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CERTIFICATE REGARDING NON-BLACK BELT PARTICIPANTS

I, (Name of Instructor) _____ a Judo black belt instructor
who has been awarded the Dan Rank of _____ by (Name of
Organization) _____ certify that (Name of Contestant)
_____ although not having been awarded the rank of
Shodan or higher, is of sufficient aptitude and skill in Judo to participate in this
event.

Instructor Signature

Print Dojo Name

Date