



## Judo Black Belt Association of Hawaii

Hawaii Judo Yudansha-Kai

P.O. Box 22411

HONOLULU, HAWAII 96823-2411

### JBBAH NAGE NO KATA EXAMINATION DURING COVID-19 PANDEMIC

July 12, 2020

To: JBBAH Judo Clubs

From: JBBAH Kata Committee

During this pandemic period, it is not possible to hold traditional Kata examinations and still comply with social distancing guidelines of maintaining 6 feet separation. At the same time there may be Judo students that, for various reasons (e.g. leaving for college on the mainland) would like to take a Nage no Kata examination during the pandemic time period.

The JBBAH Kata Committee has decided to exercise a degree of flexibility and allow for a virtual Kata examination during the pandemic period as outlined below. Please contact Gary Hashiro at [ghashiro@hawaii.rr.com](mailto:ghashiro@hawaii.rr.com) with any questions.

**EXAM TIME/DATE:** As arranged with the JBBAH Kata Committee

**EXAM FORMAT:** Examinee to perform Tori portion of Nage no Kata solo while verbally explaining movements then answer additional verbal questions after demonstrating the Kata

**SITE:** Virtual via Zoom. Examinee to provide an area approximately 20' x 6' to perform the Kata and provide the audio/video device to connect to Zoom (Bluetooth headset recommended)

**COST:** None

**EXAM LETTER:** Letters indicating the completion of the Kata examination will be issued to head instructors for those who satisfactorily demonstrate proficiency in the Kata.

**CONTACT:** Gary Hashiro (721-5881 or [ghashiro@hawaii.rr.com](mailto:ghashiro@hawaii.rr.com)) to arrange the Kata exam

**Note:** Those who can't perform the kata for medical reasons will be required to demonstrate (or explain) an understanding of the principles involved in the various techniques within the limits of their physical abilities.



**Covid-19 Pandemic Virtual Nage No Kata Exam  
Judo Black Belt Association of Hawaii  
Registration and Waiver Form**

E-mail completed registration form to ghashiro@hawaii.rr.com

Participants Name: \_\_\_\_\_ Dojo/Club: \_\_\_\_\_  
First, Last

Open to USJF, USJA, and USA Judo members. You must present a current membership card before participating.

USJF / USJA / USA Judo (Circle one): \_\_\_\_\_  
Membership #                      Expiration Date

If assistance/accommodation is needed, check off appropriate item:

Vision Loss/Blindness: \_\_\_\_\_ Hearing Loss/Deafness: \_\_\_\_\_ Other: \_\_\_\_\_

\_\_\_\_\_  
Specify type of assistance/accommodation requested or name of person assisting

**Waiver**

In consideration of my participation in the virtual Kata examination, I do hereby for myself, my heirs, executors, administrators and assigns, waive, release and forever discharge any and all rights and claims for damages and losses which I may have or which may hereafter accrue to me against the Judo Black Belt Association of Hawaii, or their successors or assigns, for any and all injuries which may be sustained and suffered by me or my children in connection with my association with or participation in the Judo Black Belt Association of Hawaii Kata examination.

Furthermore, I will ensure that the area I will use to perform the virtual Kata exam is flat, free of obstacles, and otherwise safe to perform the virtual Kata examination.

\_\_\_\_\_  
Signature of parent or legal guardian      Date  
Of contestant under 18 years of age

\_\_\_\_\_  
Signature of Contestant                      Date

**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., Judo Black Belt Association of Hawaii, Inc., Hawaii Boys & Girls Club Judo, and Boys & Girls Club of Hawaii**, 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., Judo Black Belt Association of Hawaii, Inc., Hawaii Boys & Girls Club Judo, and Boys & Girls Club of Hawaii**, 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