



ALL – FEMALE JUDO CLINIC

Sunday, May 23, 2010
Philadelphia, Pennsylvania
Open to all girls 6 years old and up

- Mission:** A day where female judo players can get together to practice, get to know one another, and learn from other women judo players
- Clinicians:** Celita Shutz, fourth degree black belt, 5x US National Champion, 2x World Team Member, 3x Olympian
Stephanie Moyerman, second degree black belt, Watson Fellow, US World University Games Team Member, Maccabiah Team Member, 3x US Junior National Champion
- Event Director:** Sue Oles, fourth degree black belt, International Pan American Referee and former judo player
- Contact:** dojo@libertybelljudo.com or call Angie, Project Manager, (215) 962-5362
- Where:** Liberty Bell Judo Dojo, 51 Buck Road, Huntingdon Valley, PA 19006
- Time:** 10:00 am – 5:00 pm (BBQ dinner to follow clinic)
- Eligibility:** Must be a current primary member of the USJF, USJA or USA Judo in order to participate
- Sanctioned by:** USJF Sanction #10-05-13
- Preregistration Fee:** \$20.00 per female (includes lunch and dinner) MUST be postmarked by Friday, May 14, 2010
Packets with 5 or more entries, \$15.00 per female (must be postmarked by Friday, May 14 and all entries enclosed in one packet)
- Late & On-site Registration Fee:** \$25.00 per female (includes lunch and dinner) all forms received with a postmark after May 14, 2010 and on-site
- Spectators:** Free (female only)
- BBQ Dinner Fee (guests):** \$10.00 per guest (co-ed, everyone is invited)
- Water and Sports Drinks will be available for sale at the dojo (50¢ and \$1.00, respectively) or feel free to bring your own drinks

WAIVER AND RELEASE OF LIABILITY AND AGREEMENT REQUIRED TO PARTICIPATE

Liberty Bell Judo & Sambo Academy ▯ WWW.LIBERTYBELLJUDO.COM

Registration Form

MAIL FORMS TO: Angie Kaya, 3549 Brownsville Road, Trevoese, PA 19053

Name _____ Birth Date _____

Address _____

City _____ State _____ ZIP _____

Telephone _____ Email _____

USJI, JF, or JA (circle)# _____ Expiration Date _____

Judo Questionnaire

Help us understand what your questions/needs are as a female in judo. Please feel free to write on the back of this page or add pages for your answers. Your answers are for informational purposes only and are not required for participation in the clinic.

Age _____ Competition Weight _____ Rank _____

Club _____ Instructor _____

When did you start judo? _____

Why did you start judo? _____

What do you like/dislike about judo? _____

What do you want to accomplish at this clinic? _____

How would you improve women's judo? _____

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T-SHIRT DESIGN CONTEST

We are creating a T-shirt for this event and would like you to contribute your design idea!

The winner will have their design featured on the event T-shirt, and receive their entry refunded and a special prize (to be determined) at the event.

Use the space below to create your design and send in with your registration OR create your design on the computer and send your design to Angie at dojo@libertybelljudo.com.