

Dojo: 33 Picton Street, Newtown, Port of Spain, Trinidad, WI

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Website: www.qpjc.org

Friday 26th February 2016

RE: SCHOOLS JUDO LEAGUE AND QPJC TOURNAMENT, Saturday 12th March 2016

The Queen's Park Judo Club is hosting the captioned activities at Queen's Royal College, Queen's Park West from 10:00 am to 4:00 pm. Participants for each tournament must be at the venue at least 30 minutes before the start of the relevant competition. The Schools Judo League starts at 10 am and the QPJC Tournament starts at 1 pm.

Eligibility

The tournament is open to judoka registered with the Judo Trinidad and Tobago from yellow tip (kids) or yellow (adults) belts up. Only participants born in 2008 and earlier can participate. The Tournament Director reserves the right to refuse participation of any competitor if he/she feels that this may affect the safety of the athlete or of his/her peers.

Registration

You are kindly asked to complete the registration form attached below, detach and return to me by Thursday 10th March, with payment. The registration fee is \$50.00 per participant. An additional \$20.00 penalty fee will be added for registration forms received after this date, up to Friday 11th. REGISTRATION FORMS OR PAYMENT WILL NOT BE ACCEPTED AFTER FRIDAY 11TH MARCH. JudoTT registration forms are available at the QPJC dojo or can be downloaded from the club's website. www.qpjc.org

Best regards,

Mark Littrean

Tournament Director

TOURNAMEN	T REGISTRA	TION FORM	(All fees a	re non-refundable)	
(\$50.00 per entrant) paid Penal	Ity Fee	Receipt #		Date	
NAME (PLEASE PRINT)		DATE OF BIRT	ТН	AGE	
SEX (circle) Male / Female WEIGHT (lbs.	or kg.)	RANK	OR BELT		
SCHOOL or CLUB T	ELEPHONE #	E	MAIL		
The Head Instructor and his assistants undertake to exercise every precaution in the delivery of this tournament. In the full understanding that judo is a contact sport and there is the possibility of injury, I do not hold the Queen's Park Judo Club, its Head Instructor, his assistants and the facility's administrators liable for any injury caused to myself or to my dependant(s) as a result of participation in this tournament.					
SIGNATURE OF ENTRANT	DATE (DD/N	1M/YY)		JudoTT Registration	Number
OR OF PARENT/LEGAL GUARDIAN IF UNDER 18 YEARS				2014/15	