



OTTAWA JUDO CLUB 2025 Membership Registration Form



Participant (Name) _____ Parent/Guardian Name _____
(If participant is younger than 18 year of age)

Email (Personal) _____ Email (Secondary) _____
(Email & relationship to participant)

Phone (Primary) _____ Phone (secondary) _____ Date of Birth _____
D.O.B (Drop down menu)

Street _____ City _____

Province _____ Postal Code _____

Gender: Male Female Other

Do you have any conditions that would affect you at judo or would require special accommodations.

Start/Introductory Date _____

Previous Martial Art Experience (if any)

OTTAWA JUDO CLUB MEMBERSHIP

Please select one of the following:

Judo Trial Offer	1 Week - \$19.95	<input type="checkbox"/>	
Kids Judo	6 Month Term \$375	<input type="checkbox"/>	\$650 12 Month Term <input type="checkbox"/>
Intermediate Judo	6 Month Term \$500	<input type="checkbox"/>	\$900 12 Month Term <input type="checkbox"/>
Teen Judo	6 Month Term \$500	<input type="checkbox"/>	\$900 12 Month Term <input type="checkbox"/>
Competitive Judo	6 Month Term \$525	<input type="checkbox"/>	\$950 12 Month Term <input type="checkbox"/>
Competition Team	6 Month Term \$550	<input type="checkbox"/>	\$1000 12 Month Term <input type="checkbox"/>
Adult Judo	6 Month Term \$500	<input type="checkbox"/>	\$900 12 Month Term <input type="checkbox"/>
Black Belts	6 Month Term \$300	<input type="checkbox"/>	\$500 12 Month Term <input type="checkbox"/>

Please note the following:

- Each additional family member will receive 20% off per month, the first family member is full price.
- Cheque is to be made payable to Brian Kalsen or paid by "INTERTAC e-Transfer" to bk@briankalsen.com
- Members renewing for a term of 6 months or more may put their membership on hold for up to one month per year with one month notice. The held month will be added to the next term.

Please note that these fees **do not** include Judo Ontario membership. For insurance and liability reasons, you **must** be a member of Judo Ontario in order to participate in classes. Visit the Judo Ontario web site at http://www.judoontario.ca/website_registration/rates for more information about Judo Ontario membership levels and costs.

* There are no refunds.



OTTAWA JUDO CLUB

PARTICIPANT MEDICAL INFORMATION FORM



MEDICAL INFORMATION

PLEASE PRINT CLEARLY

Participant Name			
Date of Birth	(Drop down calendar)	Male <input type="checkbox"/>	Female <input type="checkbox"/>
Address	Street		
	City	Province	Postal Code
	OHIP/Medical #		

Emergency Contact			
Address <i>If different from above</i>	Street		
	City	Province	Postal Code
	Phone #'s	Home	Work

Family Doctor		
	Name	Phone

Health History

Details:

Allergies	Yes <input type="checkbox"/> No <input type="checkbox"/>	<input type="text"/>
Asthma (Respiratory)	Yes <input type="checkbox"/> No <input type="checkbox"/>	<input type="text"/>
Chest pain	Yes <input type="checkbox"/> No <input type="checkbox"/>	<input type="text"/>
Diabetes	Yes <input type="checkbox"/> No <input type="checkbox"/>	<input type="text"/>
Epilepsy	Yes <input type="checkbox"/> No <input type="checkbox"/>	<input type="text"/>
Heart Condition	Yes <input type="checkbox"/> No <input type="checkbox"/>	<input type="text"/>
Recurring Headaches	Yes <input type="checkbox"/> No <input type="checkbox"/>	<input type="text"/>
Seizures	Yes <input type="checkbox"/> No <input type="checkbox"/>	<input type="text"/>
Glasses	Yes <input type="checkbox"/> No <input type="checkbox"/>	<input type="text"/>
Contact Lenses	Yes <input type="checkbox"/> No <input type="checkbox"/>	<input type="text"/>
Injuries (specify)	Yes <input type="checkbox"/> No <input type="checkbox"/>	<input type="text"/>
Medications (specify)	Yes <input type="checkbox"/> No <input type="checkbox"/>	<input type="text"/>
Concussions (How many)	Yes <input type="checkbox"/> No <input type="checkbox"/>	<input type="text"/>

Other:

I authorize the release of this information for the provision of medical treatment in the case of an emergency

Participant/Parent/Guardian (if participant is younger than 18 years of age)

Name (Print Please)

Signature

Date



OTTAWA JUDO CLUB

RELEASE OF LIABILITY, WAIVER OF CLAIMS AND INDEMNITY AGREEMENT

(To be executed by parents/guardians if participant is younger than 18 years of age)



WARNING! Please read carefully! By signing this document, you will waive certain legal rights – including the right to sue

Participant Name:

Participant Date of Birth:

(Drop down calendar)

1. This is a binding legal agreement. Clarify any questions or concerns before signing. Prior to participating, an individual who is the age of majority or older and who wants to participate in the sport of judo and the activities, programs, classes and services provided by, and/or in the events sponsored or organized by Judo Canada, Judo Ontario and the Ottawa Judo Club and its affiliated clubs and dojos, which may include but is not limited to: tournaments, competitions, lessons, training, personal or strength training, dry land training, training using machines or weights, nutritional and dietary programs, orientation or instructional sessions or lessons, and aerobic and anaerobic conditioning programs (collectively the "Activities") must acknowledge and agree to the terms outlined in this agreement.

Disclaimer

2. Judo Canada, Judo Ontario and the Ottawa Judo Club and its affiliated clubs and dojos, and their respective Directors, Officers, committee members, employees, coaches, volunteers, officials, participants, agents, sponsors, owners/operators of the facilities in which the Activities take place, and representatives (collectively the "Organization") are not responsible for any injury, personal injury, damage, property damage, expense, loss of income or loss of any kind suffered by a Participant during, or as a result of, the Activities, caused in any manner whatsoever including, but not limited to, the negligence of the Organization.

Description and Acknowledgement of Risks

I have read and agree to be bound by paragraphs 1 and 2

3. I understand and acknowledge that:
- The Activities have foreseeable and unforeseeable inherent risks, hazards and dangers that no amount of care, caution or expertise can eliminate, including without limitation, the potential for serious bodily injury, permanent disability, paralysis and loss of life
 - The Organization may offer or promote on-line programming (such as webinars, remote conferences, workshops, and online training) which have different foreseeable and unforeseeable risks than in-person programming
 - The Organization has a difficult task to ensure safety and it is not infallible. The Organization may be unaware of my fitness or abilities, may misjudge weather or environmental conditions, may give incomplete warnings or instructions, and the equipment being used might malfunction
 - (COVID-19)** The COVID-19 disease has been declared a worldwide pandemic by the World Health Organization and is extremely contagious. The Organization has put in place preventative measures to reduce the spread of COVID-19; however, the Organization cannot guarantee that I will not become infected with COVID-19. Further, participating in the Activities could increase my risk of contracting COVID-19
4. I am participating voluntarily in the Activities. In consideration of my participation, I hereby acknowledge that I am aware of the risks, dangers and hazards associated with or related to the Activities. I understand that the Organization may fail to safeguard or protect me from the risks, dangers and hazards of the Activities, some of which are listed below. The risks, dangers and hazards include, but are not limited to:
- Health: executing strenuous and demanding physical techniques; physical exertion; overexertion; stretching; dehydration; fatigue; cardiovascular workouts; rapid movements and stops; lack of fitness or conditioning; traumatic injury; sprains and fractures, spinal cord injuries, bacterial infections; rashes; and the transmission of communicable diseases, including viruses of all kinds, COVID-19, bacteria, parasites or other organisms or any mutation thereof
 - Premises: defective, dangerous or unsafe condition of the facilities; falls; collisions with objects, walls, equipment or persons; dangerous, unsafe, or irregular conditions; extreme weather conditions; and travel to and from the premises
 - Use of equipment: mechanical failure of the equipment; negligent design or manufacture of the equipment; the provision of or the failure by the Organization to provide any warnings, directions, instructions or guidance as to the use of the equipment; failure to wear safety or protective equipment; and failure to use or operate equipment within the Participant's own ability
 - Contact: contact with people or equipment; and other contact that may lead to serious bodily injury, including but not limited to concussions and/or other brain injury or serious spinal injury
 - Advice: negligent advice regarding the Activities
 - Ability: failing to act safely or within the Participant's own ability or within designated areas
 - Sport: the sport of judo and its inherent risks, including but not limited to collisions, tosses, falling, tumbling or hitting any apparatus, the floor, people, mats or other surfaces; physical contact with other people; striking people and/or objects or equipment; being thrown to the floor;
 - Cyber: privacy breaches; hacking; and technology malfunction or damage
 - Conduct: the Participant's conduct and conduct of other persons including any physical altercation between participants
 - Travel: travel to and from the Activities
 - Negligence: my negligence and negligence of other persons, including NEGLIGENCE ON THE PART OF THE ORGANIZATION, which may increase the risk of damage, loss, personal injury or death.

Terms

I have read and agree to be bound by paragraphs 3 and 4

5. In consideration of the Organization allowing me to participate in the Activities, I agree:
- That when I practice or train in my own space, I am responsible for my surroundings and the location and equipment that I select
 - That my mental and physical condition is appropriate to participate in the Activities and I assume all risks related to my mental and physical condition
 - To comply with the rules and regulations for participation in the Activities
 - To comply with the rules of the facility or equipment

- e) That if I observe an unusual significant hazard or risk, I will remove myself from participation and bring my observations to a representative of the Organization immediately
- f) The risks associated with the Activities are increased when I am impaired and I will not to participate if impaired in any way
- g) That it is my sole responsibility to assess whether any Activities are too difficult for me. By commencing an Activity, I acknowledge and accept the suitability and conditions of the Activity
- h) That I am responsible for my choice of safety or protective equipment and the secure fitting of that equipment
- i) **(COVID-19)** That COVID-19 is contagious in nature and I may be exposed to, or infected by, COVID-19 and such exposure may result in personal injury, illness, permanent disability, or death

Release of Liability and Disclaimer

6. In consideration of the Organization allowing me to participate, I agree:
- a) That the sole responsibility for my safety remains with me
 - b) To ASSUME all risks arising out of, associated with or related to my participation
 - c) That I am not relying on any oral or written statements made by the Organization or its agents, whether in a brochure or advertisement or in individual conversations, to agree to participate in the Activities
 - d) To WAIVE any and all claims that I may have now or in the future against the Organization
 - e) To freely ACCEPT AND FULLY ASSUME all such risks and possibility of personal injury, death, property damage, expense and related loss, including loss of income, resulting from my participation in the Activities
 - f) To FOREVER RELEASE and INDEMNIFY the Organization from any and all liability for any and all claims, demands, actions, damages (including direct, indirect, special and/or consequential), losses, actions, judgments, and costs (including legal fees) (collectively, the "Claims") which I have or may have in the future, that might arise out of, result from, or relate to my participation in the Activities, even though such Claims may have been caused by any manner whatsoever, including but not limited to, the negligence, gross negligence, negligent rescue, omissions, carelessness, breach of contract and/or breach of any statutory duty of care of the Organization
 - g) To FOREVER RELEASE AND INDEMNIFY the Organization from any action related to my becoming exposed to or infected by COVID-19 as a result of, or from, any action, omission or negligence of myself or others, including but not limited to the Organization
 - h) That the Organization is not responsible or liable for any damage to my vehicle, property, or equipment that may occur as a result of the Activities
 - i) That negligence includes failure on the part of the Organization to take reasonable steps to safeguard or protect me from the risks, dangers and hazards associated with the Activities
 - j) This release, waiver and indemnity is intended to be as broad and inclusive as is permitted by law of the Province of Ontario and if any portion thereof is held invalid, the balance shall, notwithstanding, continue in full legal force and effect

7. **Jurisdiction**

I agree that in the event that I file a lawsuit against the Organization, I will do so solely in the Province of Ontario and further agree that the substantive law of the Province of Ontario will apply without regard to conflict of law rules.

8. **Acknowledgement**

I have read and agree to be bound by paragraphs 5 to 7

I acknowledge that I have read and understand this agreement, that I have executed this agreement voluntarily, and that this agreement is to be binding upon myself, my heirs, spouse, children, guardians, next of kin, executors, administrators and legal or personal representatives. I further acknowledge by signing this agreement I have waived my right to maintain a lawsuit against the Organization on the basis of any claims from which I have released herein.

Parent/Guardian (if participant is younger than 18 years of age)

Name (print please)

Signature

Date

**OTTAWA
JUDO CLUB**