

2016 Daiheigen Yudanshakai Summer Judo Camp

Sponsored by:

Daiheigen Yudanshakai
Emmett Judo Club (EJC)
CSI Judo Club (CSIJC)
Southern Idaho Judo Institute (SIJI)
Western Idaho Judo Institute (WIJI)

Project Managers:

Robert Suyehira
Bryan Matsuoka
Michael Eldred

Date & Location:

Jul. 29- Aug. 2nd at College of
Southern Idaho

Sanctioned by:

United States Judo Federation (USJF)
Event #: 16-07-06

Eligibility & Purpose:

- This camp is open to junior judoka 12 years and older with a rank of orange belt and higher. (Judoka not meeting these criteria may be considered by the project managers)
- This camp will provide an opportunity to develop judo skills and make lasting friendships during the summer. A major goal of this event is to provide a positive experience that will keep the group interested in judo thru their teenage years and beyond.
- All participants must be currently registered and members in good standing with one of the following organizations: United States Judo Federation, Inc. (USJF), USA Judo (USJI), and/or the United States Judo Association (USJA), with proof of current insurance coverage. **You must provide your current membership card or a copy to participate in this camp.**

Location:

- CSI Judo Club • College of Southern Idaho, 315 Falls Avenue, Twin Falls, ID 83303

Featured Clinician:

- Toni Lettner- German National Champion and Multiple-Time International Champion & Medalist

Coach for: Bundesliga Team Champion TSV Abensberg
Team Germany at New York Open\
Cohen Brother Judo Club
Barrington Judo

Personal & Preparation Coach for: Ole Bischof/GER (2008 Olympic Champion)
Aleksei Budolin/EST (2000 Olympic Bronze)

Assisting Clinician:

- Michael Eldred- 8x World Cup Medalist, 4x Senior National Champion

Fees:

- Camp fee- \$275 for 5 days, which includes training fees, extra activities, lunch and dinner.
- Individual Day Session Fee- \$75 per day (includes training fees, lunch and dinner)

Housing:

- Dorm room with breakfast included offered for \$100 extra.
- Includes 5 nights lodging- afternoon check-in on Friday, Jul. 29th and morning checkout Wednesday, Aug. 3rd.
- Breakfast included Jul. 30th to Aug. 3rd.
- Dorm rooms will house two people per room.
- Chaperones will be staying in the dorms to watch and help judo camp participants.
- When using the dorm room you must provide your own bedding and shower supplies.

Food and Housing Option for Personal Chaperones (limited space available):

- Personal chaperones of camp participants can stay at the dorms for a fee of \$200
- Fee includes 5 nights lodging- afternoon check-in on Friday, Jul. 29rd and morning checkout Wednesday, Aug. 3rd.
- Fee includes breakfast (Jul. 30-Aug. 3rd), lunch (Jul. 30-Aug. 3rd), and dinner (Jul. 30-Aug. 2nd)
- Dorm rooms will house two people per room.
- When using the dorm room you must provide your own bedding and shower supplies.
- Completion of camp registration form and waiver will be required.

Tentative Activities:

- An Outdoor Challenge Course will be part of the camp. More information can be found at the following link: <http://recreation.csi.edu/outdoors/outdoorChallenge/faqs.asp>
- A guided rafting trip along the Hagerman section of the Snake River. More information can be found at the following link: <http://idahoguideservice.com/index.php?action=faq>
- To participate in the two above activities the attached forms must be completed ahead of time.

Tentative Schedule:

- **Friday, Jul. 29th**
 - 5:00-7:00 pm Arrival/Dorm Room Check-in
 - 7:00-8:00 pm Orientation
 - 8:00-8:45 pm Dinner

8:45-9:15 pm Dorm Room Check-in (if needed)

- **Saturday, Jul. 30th**

7:00-8:30 am Breakfast
9:00-10:30 am Morning Training
11:00-12:30 pm Lunch
1:30-3:00 pm Afternoon Training
5:30-7:00 pm Evening Training
7:00-8:30 pm Dinner

- **Sunday, Jul. 31st**

7:00-8:30 am Breakfast
9:00-10:30 am Morning Training
11:00-12:30 pm Lunch
1:30-3:00 pm Afternoon Training
5:00-6:30 pm Evening Training
7:00-8:00 pm Activity
8:00-9:00 pm Dinner

- **Monday, Aug. 1st**

7:00-8:30 am Breakfast
9:00-11:30 am Outdoor Challenge Course
11:30-12:30 pm Lunch
1:30-3:00 pm Afternoon Training
5:30-7:00 pm Evening Training
7:00-8:30 pm Dinner

- **Tuesday, Aug. 2nd**

7:00-8:30 am Breakfast
9:00-3:30 pm Rafting
4:30-6:00 pm Evening Training
6:30-8:00 pm Activity/Dinner
8:00 pm Departure (if needed/desired)

- **Wednesday, Aug. 3rd**

7:00-8:30 am Breakfast
8:30 am Departure

Things To Bring:

- Clean judo gis (preferably 2-3 gis), any individual with a dirty, smelly, or poorly maintained gi will not be permitted to workout. Wash your gis & repair all tears and holes in them before you arrive.
- A towel to dry yourself as needed during breaks and after the workouts

- A water bottle to stay hydrated during training sessions
- Footwear - zori, slippers, sandals, & etc. to keep your feet clean off the mat.
- Swimsuit, running clothes and shoes.
- If staying in dorm rooms, you must provide your own bedding and shower supplies.
- Have & demonstrate good personal hygiene, respect, and appreciation for yourself and others.

Video Recording:

- People may video record the instruction and the training for personal/private use.

For more information, please contact:

- Michael Eldred, mme@fmtc.com, 208-412-8246 (cell)

REGISTRATION CHECK OFF LIST

- Completed Registration Form
- Completed Waiver & Release Form
- Copy of current membership card
- Check made payable to WIJI for proper amount
- Completed Outdoor Challenge Course Waiver
- Completed Rafting Participation Form

All Camp Forms and Fees (including dorm room fees) must be received by Friday July 15th or a \$50 late fee will apply.

Make Checks for Camp Fees and Dorm Rooms to:

WIJI (Western Idaho Judo Institute)

Please Mail All Forms and Checks to:

Western Idaho Judo Institute
Attn: Michael Eldred
P.O. Box 202
Fruitland, ID 83619

**COLLEGE OF SOUTHERN IDAHO
RELEASE OF LIABILITY AND ASSUMPTION OF THE RISK**

For and in consideration of my being allowed to participate in utilizing the College of Southern Idaho (CSI) Challenge Course programs, services, facilities and equipment either on or off of the College of Southern Idaho campus I do hereby agree to indemnify, release and hold harmless the College of Southern Idaho, a political subdivision of the State of Idaho, inclusive of its officers, employees, volunteers, agents, insurers and any elected or appointed officials of CSI from any and all civil liability involving any and all forms of injury except those which may arise as a result of willful, wanton or reckless conduct by CSI or its agents adding unwarranted danger to my participation in such event.

I understand that direct supervision by CSI staff may not be provided and by participating in, traveling to or from, or using the programs, services, facilities of the CSI challenge course, I expose myself to the risk of injuries including but not limited to the following: temporary or permanent muscle soreness, sunburn, exposure to the elements, sprains, strains, cuts, abrasions, bruises, ligament and/or cartilage damage; head, neck, or spinal injuries, loss of use of arms and/or legs, eye damage, weather-related accidents, emotional trauma, disfigurement, or death.

I further authorize CSI to provide medical treatment to the extent necessary to prevent further injury or death.

Medical/Health or other issues:

I feel the group should know about: (give information voluntarily): _____

I, _____ (printed name of participant), of my own free will, for my family, my minor children, my heirs and executors and myself have read, understand and acknowledge the risks and liability for myself this date of _____. (Date)

I acknowledge that there are risks associated with my participation in the event identified on this Release, and I agree to assume those risks. I hereby grant this release, for myself, my heirs, executors, administrators and assigns. I affirm that I am: _____ at least eighteen (18) years old or _____ less than eighteen (18) years old.(initial one) **If less than 18, release by parent or guardian is required.**

I have read the foregoing and agree that the terms of this release are legally binding and that nobody's oral statement to the contrary can void or alter the terms of this release.

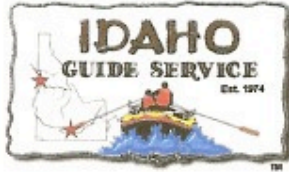
DATED this _____ day of _____, 20__.

PARTICIPANT:

(Signature) (Printed name)

Witnessed by Date (Printed Name)

NOTE: We strongly encourage you to consult with a physician before participating in any physical activity to determine any potential conditions that may adversely affect your participation. We strongly recommend that all participants have a medical insurance policy. Activities may involve running, lifting, bending, balancing, and climbing. Some potential conditions that may affect your participation are: recent or recurring injuries, recent medical procedures, diabetes, seizures, asthma, allergies, and heart conditions. Please carry emergency medication for the above conditions. If you have any questions regarding the language or details of this document prior to signing, please contact Mike Mason at mmason@csi.edu.



Olin & Shelley Gardner
Idaho Guide Service Inc.
 Twin Falls & Riggins Idaho
 Toll Free 1-888-73IDAHO
www.idahoguideservice.com

PARTICIPANT AGREEMENT, RELEASE AND ASSUMPTION OF RISK

In consideration of the services of IDAHO GUIDE SERVICE INC., their agents, owners, officers, volunteers, participants, employees, and all other persons or entities acting in any capacity on their behalf (hereinafter collectively referred to as IGS), I hereby agree to release, indemnify, and discharge IGS, on behalf of myself, my children, my parents, my heirs, assigns, personal representatives and estate as follows:

1. I acknowledge that my participation in a guided river trip entails known and unanticipated risks that could result in physical or emotional injury, paralysis, death, or damage to myself, to property, or to third parties. I understand that such risks simply cannot be eliminated without jeopardizing the essential qualities of the activity.
The risks include, among other things: whitewater rapids will be encountered. I can be jolted, jarred, bounce, thrown to and fro and shaken about during rides through some of these rapids. It is possible that I could be injured if I come in contact with frames, food boxes, other storage containers, or other fixed equipment to the operation of the expedition and the outfitting of the rafts. Rafts could turn over or I could be washed overboard. I can slip or fall during a hike, resulting in damage to equipment or personal injury. Accidents can occur getting on and off the raft. Rafts are slippery when wet. Accidents can occur during transportation to and from the trip embarkation point in IGS fifteen passenger vans or other conveyance. Exposure to the natural elements can be uncomfortable and/or harmful. I am aware that this exposure could cause sunburn, dehydration, exhaustion, heat stroke, and heat cramps. I understand that the initial shock of exposure to cold water can be dangerous and that prolonged exposure to cold water can result in hypothermia and in extreme cases death and accidental drowning.
 Furthermore, IGS employees have difficult jobs to perform. They seek safety, but they are not infallible. They might be unaware of a participant's fitness or abilities. They might misjudge the weather, the elements, or the terrain. They might give inadequate warnings or instructions, and the equipment being used might malfunction.
 2. I expressly agree and promise to accept and assume all of the risks existing in this activity. My participation in this activity is purely voluntary, and I elect to participate in spite of the risks.
 3. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless IGS from any and all claims, demands, or causes of action, which are in any way connected with my participation in this activity or my use of IGS equipment or facilities, **including any such claims which allege negligent acts or omissions of IGS.**
 4. Should IGS or anyone acting in behalf, be required to incur attorneys fees and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs.
 5. I certify that I have adequate insurance to cover any injury or damage I may cause or suffer while participating, or else I agree to bear the costs of such an injury or damage myself. I further certify that I am willing to assume the risk of any medical or physical condition I may have.
 6. In the event that I file a lawsuit against IGS, I agree to do so solely in the state of IDAHO, and I further agree that the substantive law of that state shall apply in that action without regard to the conflict of law rules of that state. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.
- By signing this document, I acknowledge that if anyone is hurt or property is damaged during my participation in this activity, I may be found by a court of law to have waived my right to maintain a lawsuit against IGS on the basis of any claim from which I have released him or her herein. I have had sufficient opportunity to read this entire document. I have read and understood it, and I agree to be bound by its terms.**

Address: _____

Phone: _____ Email: _____ Date: _____

PARENTS OR GUARDIANS ADDITIONAL INDEMNIFICATION
 (Must be completed for participants under the age of 18)

Signature of Participant: _____ Print Name: _____

In consideration of _____ (print minors name)("Minor") being permitted by IGS to participate in its activities and to use its equipment and facilities, I further agree to indemnify and hold harmless IGS from any and all claims which are brought by, or on behalf of Minor, and which are in any way connected with such use or participation by Minor.

Parent or Guardian: _____ Print Name: _____ Date: _____

Emergency Contact: _____
 (Name/address/phone) _____

COMPLETE AND RETURN