

Learn Judo from Legendary Olympians and Coaches

James Bregman, Patrick Burris, Jason Morris and David Williams

Instruction in Competitive Skills and Training Methods

(Please see individual biographies on next page)

USJF Sanction # 19-09-14

Date: Sunday, September 15, 2019

Site: Sport Judo, 5405-A Port Royal Rd, Springfield, VA 22151. 703-407-1691

Eligibility: Members of USJF, USJA and USA Judo Only

Fees: \$50, Checks to Shufu Judo Yudanshakai or cash.

Coaches

Certification: USJF, USJA and USA Judo coach certification is available. Each will be responsible for issuing their "OWN" certification protocols
There are additional fees for USJA and USA Judo Coach Certification. USJA Coach Certification for is available at:
USJF Coaches Certification - \$75 for certification (includes "JUDO Coaching, Strategy and the Science for Success" by Hayward Nishioka). Recertification fee is \$50. Please note that to obtain USJF Coach Certification, you must be a member of USJF and complete the online testing for USJF Coach Certification. See attached form and/or Register on-line at <http://www.usjfcoach.com/online-national-reg.html>
USJA Coaches Certification (or see and send in attached form)
<https://www.usja.net/staff/forms/72/document/download?display=inline>
USA Judo Coach Certification Form: (or see attached form)
https://docs.usajudo.net/forms/Coach/USA%20Judo%20Coach%20Certification%20Application_fillable.pdf

Contact: Rob Reilly, reilly@media.mit.edu, 413.329.1878 (mobile), and/or,
Roy Englert - royenglertjr@aol.com, Clinic Coordinators

If assistance/accommodation is needed (check off appropriate box):

☐ Vision Loss/Blindness ☐ Hearing Loss/Deafness

Type of assistance/accommodation requested or

Name of person assisting: _____

Name: _____ Rank: _____

Club: _____ Email Address: _____

Address: _____

Phone: _____ (please indicate home/cell)

Card Number: _____ USJF USJA USA Judo

Expiration Date: _____ (Card must be presented at Clinic)

Emergency Contact Name and phone number: _____

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James Bregman – originally started at Washington Judo Club but went on to train in Tokyo, Japan. He practiced at Meiji University, the Kodokan, and the Tokyo Police Academy. He was a member of the first US Olympic Judo team, which competed in the 1964 Tokyo Olympics and he won a **Bronze** medal. The following year, he was again a Bronze medalist in the World Championships in São Paulo, Brazil. In 1965, Jim was the **Gold** medalist in the Maccabiah Games and the Pan-American Games. Bregman Sensei also served as United States Judo Association (USJA) President on 3 different occasions.

Patrick Burris – 1972 & 1976 Olympic Judo Teams, 5 - time Senior National Champion, Founder/Director of USA Judo Stars Foundation and present **USA Judo Coach Education and Certification Program Director**

Jason Morris – USA Olympian in 1988, 1992, 1996 and 2000, Olympic Judo **Silver** medalist in 1992 Barcelona Olympics. Jason was Olympic coach at 2008 Beijing Olympics. Jason has had numerous athletes from Jason Morris Judo Center in the World Championships and the Olympics.

David Williams – **IJF A referee** (recently has refereed on the International circuit), International judo competitor, USA Judo World Team member 1993, International Coach, former Athlete Representative to the USA Judo Board of Directors

Eric Spears - Vice President of Shufu Judo Yudanshakai and USJF Master Instructor for Coach and Teacher Certification Programs

Roy Englert - Rokudan, IJF - A referee, and President of Shufu Judo Yudanshakai. He is a practicing lawyer and has been a member of the DC Bar since 1981.

Dr. Rob Reilly – USJA coach certification clinician, former MIT educational researcher in ‘how people learn’.

Dr. Lisa Capriotta and Robert Gouthro – National kata champions and world kata team members.

Additional clinicians’ biographies were not available at time of publication of this flyer

Cooperation Among Different Organizations -
This event is sponsored by Shufu Judo Yudanshakai
And United States Judo Federation, and also features
Prominent leaders from USA Judo and
The United States Judo Association.

Bring your judo gi – coach certification will have an on-mat session.

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Agenda for the clinic:

Photo Ops: during on-mat sessions and lunch; varying clinicians, who are not leading a session, will be available for photographs.

8:30-9:00 • Walk-up registration

9:00-9:20 • Introductions, review agenda, coach certification processes.

9:20-10:00 • Panel format with audience comments/wisdom: Bregman/Burris/Morris/Williams – Developing competitive, non-competitive, and special athletes, training, conditioning at all levels, promotions.

10:00-10:10 • Capriotti and Gouthro – perspectives on kata competition, judging certification, *etc.*

10:10-11:10 • Morris – Teaching & Learning Competitive Skills – outside the box perspective on techniques.

11:10-11:15 • Unique Judo drills – brief showcase of drills that participants employ at their club.

11:15-12:15 • Burris - Teaching & Learning Competitive Skills – entries/tactics for ne waza.

12:15-12:30 • Englert – Legal aspects.

12:30-1:15 • Lunch

- photo ops with the Olympians will be created during 'lunch'
- simultaneous free form Q&A chats in various locations: USJA-Bregman, Reilly; USJF-Englert; USA Judo-Burris; Kata/Kata certification-Capriotti, Gouthro; Coach Certification processes-Spears, Mantel, Sherwin.

1:20-1:25 • Unique Judo drills – brief showcase of drills that participants employ at their club.

1:25 1:45 • Burris/Reilly/Spears – Teaching/Coaching Pedagogy – the processes of teaching, and, learning a physical skill. Strategy to win, Scouting opponents

1:45-2:45 • Bregman - Teaching & Learning Competitive Skills – counters & combinations.

2:45-3:00 • Williams – the role, development-of, and, perspective of a referee.

3:0-4:00 • Bregman/Williams/Morris/Burris – on-mat review/practice.

4:00-4:10 • Q&A, closing comments

4:10-4:30 • simultaneous free form Q&A chats in various locations: USJA-Bregman, Reilly; USJF-Englert, Spears; USA Judo-Burris; Kata/Kata certification-Capriotti, Gouthro; Coach Certification processes-Spears, Mantel, Sherwin.

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., Shufu Judo Yudanshakai, Inc., Sport Judo, and individuals**, 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., Shufu Judo Yudanshakai, Inc., Sport Judo, and individuals**, 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

United States Judo Federation

COACH CERTIFICATION CLINIC

CLINIC DATE:

LEVEL:

CLINICIAN:

SANCTION NUMBER:

APPLICANT NAME: _____

ADDRESS: _____

CITY/STATE/ZIP: _____/_____/_____

TELEPHONE NUMBER (include area code): _____

EMAIL ADDRESS: _____

DATE OF BIRTH: _____ RANK: _____

USJF NUMBER: _____ EXPIRATION DATE: _____

USA JUDO NUMBER: _____ EXPIRATION DATE: _____

USJA NUMBER: _____ EXPIRATION DATE: _____

BACKGROUND: EXPIRATION DATE: _____ USJF/OTHER (if not a USJF Background
Check, you must send a copy)

CDC HEADS UP CONCUSSION CERTIFICATION: DATE OF CERTIFICATION: _____ (must
send a copy to the USJF National Office)

SAFESPORT CERTIFICATION: DATE OF CERTIFICATION: _____ (must send a copy to
the USJF National Office)

Signature of Clinician

**Must be a USJF member and meet the qualifications to receive a certificate
and badge. A picture is needed for your badge. You may either mail or email a
picture of yourself for the badge.**

2019-2022 USA Judo Coach Certification New/Renewal Application Date:

Please print or type. Certificate will be printed with name as you provide.

First Name:

Middle Name or Initial:

Last Name:

Legal Name (if different from above)

Mailing Address for Certificate

City State Zip Code

Phone Number: () -

Email Address:

@

Judo Rank: Date Rank Rec'd:

Date of Birth:

Club Name:

☐ Head Coach Name: Please check here if you are the Head Coach

USA Judo Membership Number & Exp. Date:

Exp / /

Background Screen Expiration Date

SSCI Background Screen Completion Date: Renewal information is in the required attachments section of this application.

New Coach ☐ Renewing Coach ☐ Current Coach Level:

☐ State ☐ Regional ☐ National ☐ Continental ☐ International ☐ International Gold
Judo Rank Requirements; State-Brown Belt, Regional-Shodan or higher, National-Shodan or higher, Continental-Nidan or higher, International-Sandan or higher

Code of Conduct; I have read the Coaches Code of Conduct and by accepting Coach Certification with USA Judo I attest that I will make every effort to adhere to the stipulations as listed in the Code. I also promise that I will make every effort to provide positive and professional coaching to all individuals who are entrusted to me. Additionally, I will endeavor to constantly improve my Coaching skills and knowledge in an effort to improve myself as well as the future of my athletes. Code is available at www.usjudo.org

X
Coach Signature Date

CLINICIAN SIGN-OFF

I attest that the above named Coach has successfully completed the requirements for _____ Coach Certification Level.

Name of Clinician and Date: (clinician must sign for new coaches and upgrade requests)
National Level Maximum – rank requirement enforced.

Clinician Name: Please print:

Clinic Date/Location:

Clinician Signature:

Instructions for submitting application;

Please mail application and all support documents to: Patrick M. Burris, Director USA Judo Coach Program 301 S. Broadway Ave., Moore, OK 73160 Applications marked signature required for receipt will be delayed. OR, email application and documents to burris7276@cox.net. **Expect an email confirmation of receipt. If you do not receive confirmation, please email inquiry.** Applications must be completed in full and all support documents attached. Applicants will have a 30 day grace period in which to submit missing documents. Applications will be considered void after the 30 day grace period if missing documents are not received. Certification fees are non-refundable. Contact Information – Patrick Burris cell number 405-317-3776 (text msg only) email burris7276@cox.net

Required Attachments:

Please email questions to burris7276@cox.net.

☐ A copy of your USA Judo Membership Card. Membership with USA Judo is REQUIRED. You must maintain an active USA Judo Membership throughout your Coach Certification period. Failure to do so will result in coach cert termination.

☐ A copy of your Background Screen Clearance Letter - unless recorded through USA Judo. Background Screens expire every 2 years, but must be renewed if screen will expire during your coach certification period. Link is available on your profile page at www.usjudo.org.

Coach Certification fees are non-refundable and non-transferable, regardless of background screen results. SSCI screening is required for all coaches.

☐ A Passport Size Photo. Specifications; color photo, plain background, Coach dress code appropriate, jpg format. **Make sure your name is written on the back of your photo–**

☐ OR Check here if you wish to use the photo on file from 2018

☒ A copy of your USOC SafeSport Certificate of Completion – Safesport is valid for 2 years, but may not expire during coach certification period. The link can be found on your rprofile page at www.usjudo.org Safesport certification is required for all coaches.

☐ A copy of your Judo Rank Certificate - Unless Rank has been verified through USA Judo. Your Membership Card will be marked with a "V" if your rank is verified, or if your rank has changed since 2018

☐ A copy of your Blind/ Low Vision Accreditation if

☒ applicable Concussion Training –Please go to <https://www.cdc.gov/headsup/youthsports/coach.html> for the free online course. The "Heads Up Concussion Training" Program must be completed every two years, but may not expire during your coach cert period.

☐ Payment and Code of Conduct Signature – application will not be processed without all required signatures and support info. Coach Certification fees are non-refundable and non-transferable.

Fees

☐ \$70 - 2019 USA Judo Coach Certification (includes ID Card*)

☐ \$120 – 2019-2020 Certification (included ID Card)

☐ \$220 – 4 Year Certification 2019-2022 (included ID Card)

☐ Add \$30.00 to total for late fee if paid after February 28, 2019 Late fee does not apply to new coaches. Renewals only.

☐ Subtract \$20.00 if you do not need an ID Card. An ID Card is required for coaching matside.

Total Paid \$

Payment Option Make checks payable to USA Coach

☐ Check # ☐ Visa ☐ MasterCard ☐ Paypal email for paypal acct.

@

Card Holders Name

Card # - -

Exp / CVV # (on back of card)

Signature for Credit Card Payment:

X

Application must include your signature or digital signature



UNITED STATES JUDO ASSOCIATION

Application for Coach Certification

2059 Merrick Rd. # 313 Merrick, NY 11566

Telephone: (516) 366-3311 • Fax (888) 276-3432

Website: www.usja.net • Email: support@usja.net

Section 1: Information and Instructions

- Candidates must complete Sections 2-3 of this form. Please print clearly.
- Approved course instructor must complete Section 4 for initial certification or recertification.
- Current Background Screening Check is required: www.usja.net/staff/forms/69/document/download
- Completion of USOC SafeSport program is required: www.safesport.org
- Completion of CDC HeadsUp Training Course is required: www.cdc.gov/headsups/youthsports/training/index.html
- Submit certificates of completion for SafeSport and HeadsUp training and proof of current background check with this application.
- Mail this form and \$70 to USJA. If Coaching Badge is needed include a passport size jpg photo and \$25.
- For further information on the USJA Coach Education Program visit the USJA website.
- In order to receive and maintain coach certification USJA annual or sustaining life membership must be in force, along with a current background screen. Coach certification becomes invalid at the time any of these requirements are not met.

Section 2: Applicant Information

Name _____ USJA Membership # _____

Address _____ City _____ State _____ Zip _____

Date of Birth _____ Primary Phone _____ Email _____

Name of Club _____ USJA Club # _____

Rank _____ Issued by _____ Date of Rank _____

Form of Payment : ☒ Check ☐ Visa ☐ MasterCard ☐ Discover ☐ Make check payable to USJA

Credit Card Number _____ Expiration Date _____ Coach Badge Requested ☒

Authorized Signature _____ Printed Name _____

Section 3: Coaching History

Name of Club/School/Team _____ Dates: From -To _____

Current Coach Certification: Level _____ Organization _____ Expiration Date _____

Section 4: Course Completion and Approval (To be completed by approved course instructor)

Date of Certification Clinic _____

NOTE Initial certification at any level and Recertification require attendance at a clinic for the level of certification sought.

☒ Initial Certification ☒ Renewal of certification ☒ Recertification

This candidate has been approved for certification at level:

2 ☐ 3 ☐

Signature of Approved Course Instructor

Printed Name of Course Instructor