

### JUDO MANITOBA

# **REGISTRATION FORM 2024\_2025**

Please print neatly and provide all details. You (or your parent/guardian if you are under 18) <u>must</u> complete these forms and sign the required documents before you can be registered with your club, Judo Manitoba and Judo Canada. The information provided on this form will be retained by your club and will be shared with Judo Manitoba and Judo Canada.

Club:		_
Last Name:		_ First Name:
Gender Identity:	_ Prefer not to decla	re:
Mailing Address:		
City:	Postal Code:	Home Phone:
Email:		Birth date (MM/DD/YYYY):
Role (check all that apply):	Athlete 🗌 Coach	🗌 Referee 🔲 Volunteer
For returning members only: Judo Canada Passport #: Belt Rank:		
If participant is under 18 years Parent/Guardian 1 Name:		ete the following: Contact Phone #:
Email:		
Parent/Guardian 2 (optional) Na	Contact Phone #:	
Email:		
Self-Declaration (the following of	questions are optiona	al, and you may choose to answer some or none):
Visually Impaired: 🗌 Yes 🗌 No Hearing Impaired: 🗌 Yes 🗌 No 🛛 Autistic: 🗌 Yes 🗌 No		
Indigenous (First Nation, Métis,	Inuit): 🗌 Yes 🗌 No	
Check List - For club use only		
Waiver or Assumption of Risk Form signed		
Club fees collected. Amount	:	
Judo Manitoba fees collected	k	
Individual added to Trackie, the Judo Manitoba/Judo Canada online registration system		

## **Consent Forms**



#### CONSENT TO USE OF IMAGES

I hereby grant the right to use or disclose, without payment of any fee, charge, or compensation of any kind, including royalties, any and all **non-focused**, **background or otherwise unidentifiable photographs**, **video or other visual media** (the Images) of the Participant taken by Judo Manitoba for promotional purposes. I also agree to waive any right to approve such use and waive all moral rights I have in such Images in perpetuity.

#### CONSENT TO USE OF PERSONAL INFORMATION

I understand and agree that the Participant's name and email address (and the email address of the Participant's parent/guardian, when applicable) may be used to correspond with Judo Manitoba regarding the Participant's participation, and to send information about current and future Judo Manitoba programs and services. I further agree that Judo Manitoba may also contact me to conduct research to continually improve programs. I understand and agree that the Participant's personal information will not be used for any other purpose without my consent. I further understand that Judo Manitoba makes its contact information available to the other sport organizations when reasonable (to confirm rosters, clinic notification, etc.). I further understand and agree that Judo Manitoba may also make the Participant's contact information (and the contact information of the Participant's parent/guardian, when applicable) available to the Province of Manitoba when reasonable (e.g., to send congratulations). I understand I may withdraw my consent to any further collection, use or disclosure of information about the Participant at any time by giving reasonable notice to Judo Manitoba.

Participants under 18 years of age must have this form signed by a parent or guardian.

#### **Declaration:**

I acknowledge that I am 18 years old or older. I certify that I have read and understand all of the terms of this Agreement and agree to continue to abide by all of the terms of this Agreement.

Participant (print name)

Signature

Date

#### If Participant is under 18 years of Age - Guardian signature required

I represent that I am the parent or legal guardian of the Participant and that I have the legal authority to execute this Agreement. I have read and understand the provisions of this Agreement and consent to all provision in this Agreement.

Parent/Guardian (print name)

Parent/Guardian Signature

Date