



# Hui-O-Judo Beltsville Shufu Judo Yudanshakai



## Koshiki no Kata Clinic

**Sunday, March 15, 2009**

Sanctioned by: United States Judo Federation      Sanction number: 09-03-12

Event director: Kevin Tamai

Shufu Kata Chairperson: Karen Whilden

Clinician: Sensei Eiko Shepherd  
7th Dan  
USJI & USJF Class A Judge  
USJF Kata Chairperson  
World Master Kata Chairperson  
member of CJBBA

Date: Sunday, 15 March 2009

Location: Beltsville Academic Center  
4300 Wicomico Avenue, Beltsville, Maryland

Registration: 8:30 – 9:00 AM  
Clinic hours: 9 am to 12 noon, lunch break 12-1, 1pm-4pm

Fee: \$ 20.00      Pre register before March 6, 2009  
\$ 25.00      Register after March 6, 2009

Eligibility: USJF/USJA/USJI Cards must be presented at registration

Visit our web site at <http://www.huiojudo.com>

For more information contact Kevin Tamai  
at 703-622-6861  
or email to [Kevin@huiojudo.com](mailto:Kevin@huiojudo.com)

# Koshiki No Kata

Dr. Kano preserved the techniques of this kata from the Kito-Ryu School of jujutsu, because of the extent to which these techniques embody the principle and techniques of Kodokan Judo. Since the Forms Antique were intended for the "Kumiuchi", the grappling of armored warriors in the feudal ages, it is essential to perform the movements imagining that you are clad in heavy armor. The kata is separated into two parts, omote (front) and ura (back). Also known as the Kito-Ryu No Kata, it consists of twenty-one (21) techniques. These techniques are of a high order and highly refined, and their practice brings insight into Judo theory.

## **Omote (Front)**

1. Tai (Ready Posture)
2. Yume-no-uchi (Dreaming)
3. Ryokuhi (Strength Dodging)
4. Mizu-guruma (Water Wheel)
5. Mizu-nagare (Water Flow)
6. Hikiotoshi (Draw Drop)
7. Ko-daore (Log Fall)
8. Uchikudaki (Smashing)
9. Tani-otoshi (Valley Drop)
10. Kuruma-daore (Wheel Throw)
11. Shikoro-dori (Grabbing the Neckplates)
12. Shikoro-gaeshi (Twisting the Neckplates)
13. Yudachi (Shower)
14. Taki-otoshi (Waterfall Drop)

## **Ura (back)**

1. Mi-kudaki (Body Smashing)
2. Kuruma-gaeshi (Wheel Throw)
3. Mizu-iri (Water Plunge)
4. Ryusetsu (Willow Snow)
5. Sakaotoshi (Headlong Fall)
6. Yukiore (Snowbreak)
7. Iwa-nami (Wave on the Rocks)

# Shufu Yudanshakai Entry Form for Koshiki No Kata Clinic

Cash/ check # \_\_\_\_\_

Amount: \_\_\_\_\_

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Event Director: Kevin Tamai

Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

\_\_\_\_\_

Phone Number: (H) \_\_\_\_\_ (W) \_\_\_\_\_

Email address (optional) \_\_\_\_\_

Club Name: \_\_\_\_\_

UJSI/USJF/USJA Number(Circle One): \_\_\_\_\_ Expiration Date: \_\_\_\_\_

\*\*\*Only verified, current members will participate!\*\*\*

\*\*\*New and Renewal applications will be taken on site \*\*\*

Rank: \_\_\_\_\_ Sex: M F

Age: \_\_\_\_\_ Date of birth: \_\_\_\_\_

<b><u>Check Verification:</u></b>	Name and address matches entry form and check:	Yes	No
	Name and address match driver license:	Yes	No

Driver License State \_\_\_\_\_ Driver License Number \_\_\_\_\_ Expiration date: \_\_\_\_\_

Please mail the completed entry form liability waiver and payment to:

**Beltsville Community Center  
3900 Sellman Road  
Beltsville, Maryland 20705  
Attn: Judo Clinic – Kevin Tamai**

Payment may be make by CHECK, MONEY ORDER to M-NCPPC (Maryland National Capital Park and Planning Commission): Enclosed is a Check or Money Order for \$\_\_\_\_\_.

**You MUST read and sign waiver on back of this form!!  
Entries will not be accepted without a completed & signed waiver!!**

**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 of the **United States Judo Federation, Inc., United States Judo, Inc., United States Judo Association, Inc., Shufu Judo Yudanshakai, Inc., Maryland Judo, Inc., Beltsville Community Center, Maryland National Capital Park and Planning Commission, Beltsville Academic Center, and the Hui-O-Judo Beltsville Judo Club**, I hereby:

1. Acknowledge that I am familiar with the sport of Judo and understand the rules governing the sport of Judo.
2. Agree 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. Acknowledge and fully understand that I will be engaging in a contact sport that might result in serious injury, 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, permanent disability, or death.
5. Release, waive, discharge and covenant not to sue the **United States Judo Federation, Inc., United States Judo, Inc., United States Judo Association, Inc., Shufu Judo Yudanshakai, Inc., Maryland Judo, Inc., Beltsville Community Center, Maryland National Capital Park and Planning Commission, Beltsville Academic Center, and the Hui-O-Judo Beltsville Judo Club**, together with their affiliated clubs, their respective administrators, directors, agents, coaches, and other employees or volunteers of the organization, event officials, medical personnel, other participants, their parents, 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 claims, demands, losses, or damages on account of injury, including permanent disability and death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the Releasees or otherwise to the fullest extent permitted by law.

**I HAVE READ THE ABOVE WARNING, WAIVER, AND RELEASE, UNDERSTAND THAT I GIVE UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND KNOWING THIS, SIGN IT VOLUNTARILY. 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/GUARDIAN AS EVIDENCED BY THEIR SIGNATURE BELOW.**

\_\_\_\_\_  
Participant

\_\_\_\_\_  
Participant's Signature

\_\_\_\_\_  
Date

**FOR PARENTS/GUARDIANS OF PARTICIPANTS OF MINORITY AGE  
(UNDER AGE 18 AT TIME OF REGISTRATION)**

This is to certify that I, as parent/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 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/Guardian

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Date