

**Kokushi Midwest Judo
Grand Opening Celebration and Clinic**

When: Saturday, September 15, 2018

Where: **Kokushi Midwest Judo**
1814 Glenn Park Drive, Champaign, IL 61821

USJF Sanction: 18-09-07

Join the celebration of the grand opening of Kokushi Midwest Judo. We are having an all day jubilee with two spectacular clinicians, Sensei Eiko Shepherd and Sensei Amarilis Savon, as well as special guests throughout the day.

Eiko Saito Shepherd, 8th degree black belt, is one of the world's leading specialists in kata. She is a highly sought after clinician and is known for her attention to detail and perfection. She was the first woman in Japanese history to compete against men at the Kodokan Judo Institute in Tokyo. Sensei Shepherd will be conducting a clinic that demonstrates the relationship between Nage No Kata (forms of throwing) and Katame No Kata (forms of grappling).

Amarlis Savon (CUBA, -52kg) is one of the most decorated females in judo history. She has captured three Olympic bronze medals, multiple golds at the Pan-Am Games and a gold medal at the 2003 World Championships in Osaka.

Schedule of Events

Saturday, July 21, 2018	9:30am	Registration
	10am-11:30am	Clinic
	12pm	Lunch
	1pm	Opening Ceremony
	2pm – 4pm	Clinic

Cost: \$50 to participate. USJF/CJBBA members receive a \$5 discount. Spectators are free

Eligibility: All participants must present a current *USJF*, *USA Judo* or *USJA* membership card at registration.

Contact: Grace Talusan (grace@kokushimidwest.com) or 217-693-7342

**KOKUSHI MIDWEST JUDO
 GRAND OPENING CELEBRATION & CLINIC
 WITH EIKO SHEPHERD AND AMARILIS SAVON
 1814 Glenn Park Dr, Champaign, IL
 Saturday, September 15, 2018**

Name: _____

Address: _____ City, State, Zip: _____

E-Mail: _____ Tel: _____

Dojo: _____ Rank: _____

Eligibility: Open to current USJF, USJI and USJA members. Must present card.

USJF USA JUDO USJA Number _____ Expiration _____

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: _____

In case of emergency

Name/Parent/Guardian : (minors only under age 18)		
In case of emergency contact:		
Relationship:	Tel ()	/
Address:		
City:	State:	Zip:

COST: \$50 to participate. CJBBA members receive a \$5 discount. Spectators are free.

OFFICIAL USE ONLY

Paid	Cash	Check

USJF Sanction Number: 18-09-07

BE SURE THE WAIVER ON THE BACK IS SIGNED