



**JUDO ONTARIO**  
875 Morningside Ave, Suite 2040  
Toronto, Ontario M1C 0C7  
Tel: 416-447-5836  
Toll free: 1-855-449-JUDO (5836)  
Website: [www.judoontario.ca](http://www.judoontario.ca)



## MANUAL CLUB REGISTRATION FORM

Complete all below information for the website listing. (Please type or print **very** clearly.)

Club Name

Main Contact's Name/Title

Club Address

City

Main intersection nearest club location.

E-Mail Address

Website (if available)

Club or Main Contact's Mailing Address

City

Postal Code

Name of Dojo-Shu (Head Instructor)

Judo Rank:

Judo Canada Number:

NCCP Level:

NCCP Number:

In consideration of the acceptance of the \_\_\_\_\_ Judo Club's membership in Judo Ontario, I, on behalf of the Judo Club, agree as follows:  
Insert club name on line above.

1. To abide by the By-Laws, Policies, Procedures, Rules and Regulations of Judo Ontario and Judo Canada.
2. To be bound by Judo Ontario's Code of Conduct and be bound by any disciplinary action resulting from any misconduct.
3. To pay all dues, fees and fines as required and requested by Judo Ontario.
4. To submit a list, including name, address, telephone and email of every Club Director, Coach, Volunteer and Athlete registered in our club within 30 days of registering this club.
5. To abide by all applicable Provincial and Federal legislation including the Personal Information Protection and Electronic Documents Act (PIPEDA).
6. To ensure that this Judo Club and its members enjoy the full insurance coverage and services which Judo Ontario provides to all Judo Clubs in good standing, the Judo Club hereby certifies that active judokas of all ages and categories practicing at this dojo, including new members, are fully registered and paid up members of Judo Ontario.
7. To obtain and submit to Judo Ontario a Vulnerable Sector Screening (Police Check) from the nearest local Police Service in accordance with Judo Ontario's Screening Policy.
8. That I am a fully certified NCCP Dojo Instructor Level (formerly NCCP Level 2) or higher.
9. That all assistant instructors in this dojo obtain a fully certified NCCP Dojo Assistant Level (formerly NCCP Level 1) or higher.
10. That our club members will only participate in sanctioned judo tournaments.

**I acknowledge that I have read this registration agreement in its entirety and that I, on behalf of all club members, have executed this registration agreement voluntarily and will be bound by its terms.**

Dojo-Shu's/Head Instructor's Signature

Sponsor's Signature (if applicable)

Dojo-Shu's/Head Instructor's Name (Please print/type)

Sponsor's Name (Please print/type)

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ at \_\_\_\_\_