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February 29, 2016

**3rd Annual Unifor Ontario Region
Charity Golf Classic
Granite Ridge Golf and Country Club
Milton, Ontario**

Sisters and Brothers:

Over the past 13 years the Charity Golf Classic held by the former CEP, and Unifor the last two years, has brought together members, sponsors, volunteers and employers from across the Region and our Union. Together we have raised over \$385,000.00 for the Spina Bifida and Hydrocephalus Association of Canada, a noteworthy accomplishment.

It is our pleasure to invite you to Unifor's 3rd Annual Ontario Region Charity Golf Classic, which will be held on Friday, June 3, 2016 at the Granite Ridge Golf and Country Club in Milton, Ontario.

Please register as a team as soon as possible; however, individuals registering will be grouped as best as possible. Complete and forward the enclosed golf registration form to Administrative Assistant Linda McCrorie by **May 20th, 2016**. **Golf tickets will be given out at the morning registration.**

The proceeds from the Charity Golf Classic will again be donated to the Spina Bifida Association. Spina Bifida is the number one disabling birth defect in Canada. We are committed to doing all we can to raise charitable donations to help the many Canadians who suffer from Spina Bifida. We look forward to this event as an opportunity to make friends, to build solidarity and to show our support for a worthy cause.

Our objective this year is to gather 300 golfers, men and women. We will be doing one shotgun start; on both courses (Ruby and Cobalt) at Granite Ridge.

Registration will commence at 10:30 a.m. A lunch buffet will be served between 11:00 a.m. to 12:00 p.m. Tee off at 12:30 pm and a dinner to follow around 6:00 p.m.

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Locals and companies can sponsor a hole on the golf course and in return your local number or company name will be displayed on a sponsor card at that particular hole. In addition, your local and/or company will be mentioned in the Event Brochure. All donations, prizes or sponsorships for the tournament will be appropriately recognized. **Please make cheques payable to the Unifor Ontario Region Charity Golf Classic.**

Together we can make the 2016 Charity Golf Classic a huge success. We look forward to seeing you at the event.

To register, please complete the enclosed registration form and waiver, and return it as soon as possible.

Price: **\$150.00**
\$50.00
\$500.00

Golf, Cart, Brunch, Dinner, Prizes
Dinner Only
Sponsor Card

In solidarity,



Katha Fortier
Ontario Director

KF:lmc/cope-343

cc: Jerry Dias, Peter Kennedy, Assistants to the President, Tom Dattilo-Recreation Director, Ontario National Representatives, Laura Hargrove, Kimberley O'Neil, Anne Marie Vincent



UNIFOR

**3rd Annual Ontario Region Charity Golf Classic
Granite Ridge Golf Club, Milton
Friday, June 3, 2016**

REGISTRATION

Tee-Off 12:30 p.m.

Local Number and or
Company Name

Golfers' Names:

Contact Phone Number: _____

Name of Person and Address to send tax receipt to: _____

Sponsor: yes no Amount: _____

Price: \$150.00 Golf, cart, brunch, dinner, prizes
 \$ 50.00 Dinner only
 \$500.00 Sponsor

Please return to Linda McCrorie, Administrative Assistant by fax 416-495-6552 or
linda.mccrorie@unifor.org

**Make cheques payable to Unifor Ontario Region Charity Golf Classic and send to:
205 Placer Court, Toronto ON M2H 3H9 Attn: Linda McCrorie**

PLEASE READ CAREFULLY - BY SIGNING THIS DOCUMENT YOU WILL WAIVE CERTAIN LEGAL RIGHTS INCLUDING THE RIGHT TO SUE OR CLAIM INDEMNITY IN RELATION TO THE ACTIVITY DESCRIBED HEREIN

RELEASE OF LIABILITY, WAIVER OF CLAIMS, ASSUMPTION OF RISKS, AND INDEMNITY

By signing this document I declare that I am aware that my participation in the **Unifor Ontario Region Charity Golf Classic** to be held **June 3, 2016** (the "Activity") to be held at **Granite Ridge Golf and Country Club in Milton, Ontario** (the "Location") involves risks and dangers to myself including, but not limited to, potential injury, death, personal property damage and economic loss resulting directly or indirectly from any of these (the "Risks"). I further declare that I understand that my participation in the Activity may result either directly or indirectly in injury, death, personal property damage and economic loss to a third party for which I would be responsible (the "Responsibilities").

BY SIGNING THIS DOCUMENT, WITHOUT WHICH I CANNOT PARTICIPATE IN THE ACTIVITY, I personally accept and assume all Risks and Responsibilities and agree to the following:

1. **I AGREE TO WAIVE ANY AND ALL CLAIMS** that I have or may have in the future against Unifor and/or any Unifor Local and/or any Unifor Council, and/or their respective directors, officers, employees, trustees, representatives, and agents (collectively the "**RELEASEES**") in relation to the Risks and/or Responsibilities and/or my presence at or on my way to or from the Location;
2. **I RELEASE THE RELEASEES** from any and all liability for any and all claims that I or my next of kin may have against the Releasees as a result of my participation in the Activity and/or my presence at or on my way to or from the Location;
3. **I AGREE TO INDEMNIFY AND HOLD HARMLESS THE RELEASEES** from any and all liability for claims that any third party may have against the Releasees as a result of my participation in the Activity and/or my presence at or on my way to or from the Location;
4. **I AGREE THAT THIS RELEASE SHALL BE EFFECTIVE EVEN IN THE EVENT THERE IS NEGLIGENCE, BREACH OF CONTRACT, OR BREACH OF ANY STATUTORY OR OTHER DUTY OF CARE, INCLUDING ANY DUTY OF CARE OWED UNDER ONTARIO'S OCCUPIERS LIABILITY ACT OR SIMILAR LEGISLATION IN ANY PROVINCE, ON THE PART OF THE RELEASEES;**
5. **I AGREE THAT THIS RELEASE** shall be effective and binding upon my heirs, next of kin, executors, administrators, assigns and representatives, in the event of my death or incapacity;
6. **I AGREE THAT THIS RELEASE** shall be governed by and interpreted in accordance with the laws of the province in which the Location is situated; and
7. **I AGREE THAT ANY LITIGATION** resulting from my participation in the Activity and/or my presence at or on my way to or from the Location shall be brought in the province in which the Location is situated.

By signing this document I am not relying upon any oral or written representations or statements made by the Releasees other than what is set forth in this release.

I have read and understood this document. I acknowledge that by signing this release I am waiving certain legal rights which I or my heirs, successors, executors or administrators etc. may have against the Releasees.

<u>PRINT NAME CLEARLY</u>	<u>SIGNATURE</u>	<u>DATE</u>

***If the participant is under 18 years of age, the signature of a parent or guardian is required.**