

4th Annual Unifor National 4 Person Golf Scramble Hosted by T.C.R.C.



Date: Saturday September 16, 2017

**Place: Tangle Creek
4730 Side Road #25
R.R.#3, Thornton, ON L0L 2N0
(705) 720-2150**

Time: Shotgun start at 1:00pm

**Price: \$440.00 per team
(Includes green fees, golf cart, lunch, dinner, and prizes)**

Limited to the First 36 Teams (144 Paid Golfers)

***Entry Deadline NO LATER than September 3rd, 2017*
Players Must be Unifor Members**

**Mail Entry along with Certified Cheque, Local Union Cheque or
Money Order ONLY to: *(Personal cheques will not be accepted):***

**TCRC
c/o Bill Apsey
2200 Adullam Avenue
Innisfil, ON L9S 2B3**

For further information contact Bill Apsey at (705) 718-4770.

PLEASE PRINT : ENTRY FORM
(Unifor National 4 person Golf Scramble)

Name: _____

Phone: _____ Local: _____

PLACE ME IN A FOURSOME WITH:

1. _____ 2. _____
3. _____



Open Division

OR

Women's Division

(must have four women in group)

A block of rooms have been set aside until August 15th, 2017 at the Four Points by Sheraton, for the night of September 15th, 2017 at a rate of \$129.00 for a Standard Double, Queen or King room. Please mention the Unifor National Golf Tournament when making reservations. Rates are based on two people per room.

To book online please visit:

<https://www.starwoodmeeting.com/Book/UniforGolfTournament2017>

**Four Points by Sheraton
60 Bryne Drive
Barrie, ON L4N 9Y4
(705) 733-8989**



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 event to be held **September 16, 2017** (the "Activity") to be held at **Tangle Creek**(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.