Jerry Dias President


# G.H.R.C. REGIONAL UNIFOR 10-PIN BOWLING <br> "QUALIFYING" TOURNAMENT <br> SATURDAY January 10, 2015 

Open to UNIFOR members, spouses, and children

Cataract Bowl<br>7906 Lundys Lane, Niagara Falls, ON L2H 1H1 (905) 354-9733

TEAM EVENT: MEN'S, WOMEN'S
Note: mixed teams must bowl in the men's division
SINGLES EVENT: OPTIONAL
Note: must bowl team event to be eligible for singles
The top Qualifiers in this tournament will be eligible to compete in the Unifor National team finals championship C.T.F. moral support sanctioned in St. Catharines - Saturday April 11 ${ }^{\text {th }}, 2015$.

## ALL BOWLERS MUST SIGN A WAIVER BEFORE BOWLING

MEN'S \& WOMENS DIVISION
HANDICAP - 90\% / 220 TEAM - 1050 100\% RETURN OF PRIZE FEE

ENTRY FEE \$25.00 PER PERSON INCLUDES: PRIZE FEE, BOWLING FEE, TOURNEY EXPENSES TOTAL TEAM ENTRY: \$125.00 ENTRY CLOSING DATE: FRIDAY January $\mathbf{2}^{\text {nd }}, \mathbf{2 0 1 5}$.

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## REGIONAL 10-PIN BOWLING QUALIFIER JANUARY 10, 2015 Cataract Bowl 7906 Lundy's Lane Niagara Falls, ON

(DO NOT USE)
Amt. Rec'd
Certified Cheque $\qquad$
Money Order $\qquad$
Team $\qquad$
$\qquad$
TEAM NUMBER

Open to UNIFOR members and their families. Affiliated with the Unifor National Teams in St. Catharines.

| TEAM EVENT <br> \$25 PER PERSON includes: | C.T.F. MORAL SUPPORT SANCTION | OPTIONAL SINGLES <br> \$25.00 PER PERSON includes: |
| :---: | :---: | :---: |
| Prize Fee ................... $\$ 10.50$ Bowling Fee ........... $\$ 11.00$ Tourney Expense ..... $\$ 3.50$ Total Team Fee ..... $\$ 125.00$ | Certified Cheque or Money Order ONLY payable to the G.H.R.C and mail to: | Prize Fee ...................... $\$ 10.50$ Bowling Fee ............. $\$ 11.50$ Tourney Expense ..... |
| (Entry fee must accompany entry) | REGIONAL BOWLING QUALIFIER <br> 55 Chaplin Avenue <br> St. Catharines, ON L2R 2E4 Attention: Dave Weadick | (Entry fee must accompany entry) |

TEAM SQUAD AT 11:30 AM. OPTIONAL SINGLES AT 2:30PM.
OPEN TO MEMBERS AND THEIR FAMILIES OF THE FOLLOWING UNIFOR LOCALS: 199, 275, 504, 514, 523, 525, 529, 555, 676, 707, 973, 1256, 1459, 4034, 4134, 4211, 4212, 4332, 4401, 1985 AND 1997.

| WIBC <br> Or <br> ABC\# | Print Line-up of Team in Bowling <br> Order <br> Show Full Name - Please Print | Highest <br> League <br> Average | Women |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | Men | MES |
| :--- |

## DEADLINE FOR ENTRIES FRIDAY JANUARY 2 ${ }^{\text {nd }}, 2015$

Please print or Type:
Contact Person: $\qquad$ Local: $\qquad$
Address: $\qquad$ City: $\qquad$
Postal Code: $\qquad$ Phone: ( ) $\qquad$

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 (GHRC Regional Bowling Tournament) to be held (January 10 ${ }^{\text {th }}, \mathbf{2 0 1 5}$ ) (the "Activity") to be held at (Cataract Bowl in Niagara Falls) (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.

| PRINT NAME CLEARLY | SIGNATURE | DATE |
| :--- | :--- | :--- |
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*If participant is under 19yrs of age, signature of parent or guardian is required.

1. Entry limited to UNIFOR members and their spouses. Honorary withdrawals, transfers WILL NOT be accepted. The final decision on exception from this rule rests with the tournament committee. A bowler may participate only once in an affiliated tournament. To qualify for the National Finals, a bowler must participate in a regional qualifying tournament.
2. Equal opportunity must be permitted for women members to participate in the men's event or in separate division, but not both. Both CTF and eligible non-CTF members may participate in a Moral Support Tournament with high score recognition automatically extended to CTF members.
3. Eligible non-CTF members can obtain high score recognition by purchasing unattached membership card prior to bowling. Upon receipt of fee, CTF will issue an attached individual membership card.
4. Use highest league average TWENTY-ONE GAMES OR MORE IN 2013-2014. (Refer to City Association Year Book). Averages established in summer leagues will not be acceptable.
5. In case of no 2013-14 average said bowler would use highest league average of TWENTYONE GAMES OR MORE as of December 31, 2014. All others bowl scratch - Men 180, Women 165.
6. When the 2013-14 highest league average is used and at the time of scheduled date of bowling an entrant has a current season's average for 21 or more games which is 10 or more pins above 2013-14 average, CURRENT SEASON'S AVERAGE MUST BE USED.
7. Bowlers are cautioned to familiarize themselves with CTF rule \#319B, \#319E, which applies to ALL PARTICIPANTS.
8. Any bowler whose average has been re-rated by their local association must use their re-rated average in this tournament.
9. Any bowler who has qualified for a prize of $\$ 300.00$ or more in any event in a tournament within the previous 12 month period, must report his/her actual score. Position and amount won at the time of entry and is subject to possible re-rating before bowling. Failure to accurately report averages and/or prize winnings in previous 12 months can result in disqualification. If contestant reports a higher average than true average, no correction will be made and they will be handicapped accordingly. If lower average than true average is submitted contestant will be disqualified and subject to suspension from CTF membership.
10. Team handicap basis $-90 \%$ of difference between average and 1,050 added to game score.
11. The number of team qualifiers allowed in the affiliated UNIFOR tournament will be based on a ratio of ONE for every FIVE entries and fraction thereof.
12. IT SHALL BE EACH BOWLER'S RESPONSIBILITY TO VERIFY HIS/HER AVERAGE, WHETHER ORIGINALLY SUBMITTED BY THE BOWLER, HIS/HER TEAM CAPTAIN OR OTHERS.
13. Tournament Committee reserves the right to re-rate averages that are questionable. If re-rated and average is not accepted by bowler, entry fee is refundable.
14. Tournament Committee reserves the right to settle all disputes not covered by CTF.
15. Prizes will not be paid until averages of all winners have been verified. Prize fee will be returned $100 \%$.
16. POSITIVELY NO REFUNDS, IN CASE OF ABSENCE YOU MAY SEND SUBSTITUTE.
17. Any person, or persons, who violated the rules of this tournament individually or collectively, shall forfeit their fees paid and any and all rights to claim or hold prize awarded in this tournament.
NOTE: Local Unions and bowlers should please note that there is no obligation for Locals or Councils to pay expenses for top qualifiers to the Team Finals Championship or to area / regional tournaments.

[^0]:    FOR ADDITIONAL INFORMATION AND ENTRY FORMS, CONTACT YOUR UNION RECREATION CHAIRPERSON, COMMITTEE MEMBER OR TOURNAMENT
    DIRECTORS: DAVE WEADICK (905) 685-1641 / MATT JACKSON (905) 682-2991

