



SOUTHWESTERN ONTARIO RECREATION COUNCIL

www.uniforsworc.ca & "UNIFOR SWORC" on Facebook

APPLICATION

Jack Battersby Memorial CRIB & EUCHRE TOURNAMENT SUNDAY, March 3, 2019

PLACE – CANADIAN LEGION, BRANCH #143 --- (1570 Marentette, Windsor, Ontario)

TIME – CRIBBAGE – 10:00 a.m. and EUCHRE – 1:00 p.m.

Please note: No door applications will be accepted

ENTRY FEE – CRIBBAGE - \$20.00 per team (Guaranteed - \$200.00 1st Place Team)
– EUCHRE - \$10.00 per person (Guaranteed - \$150.00 1st Place Person)
INCLUDES: PRIZES AND TOURNAMENT EXPENSES
(FOOD & CASH BAR AVAILABLE FOR BOTH EVENTS)

This tournament is open to UNIFOR members, their spouses/partners and immediate family ONLY.

Proof of UNIFOR membership (or relation to) must be provided at tournament check in.

NOTE – This year's tournament will be "PROGRESSIVE EUCHRE"
Crib players – MUST BRING THEIR OWN CRIB BOARDS

Please make LOCAL UNION CHEQUES, CERTIFIED CHEQUE OR MONEY ORDERS ONLY

Please make you cheques payable to:
S.W.O.R.C.

Mail to: SWORC CRIBBAGE & EUCHRE
C/O UNIFOR Local 444
1855 TURNER RD.
WINDSOR, ONTARIO
N8W 3K2

DEADLINE FOR ENTRIES—Monday, February 25, 2019

For further information contact Tournament Director: LEO LABBEE 519-965-2770 or Roger Dzugan 519-974-8437

APPLICANT NUMBER #1

Please indicate which events you are entering. Crib is a team event, Euchre is an individual event.

CRIBBAGE _____ EUCHRE _____ BOTH _____

PLEASE PRINT

NAME _____ LOCAL UNION _____

ADDRESS _____ CITY _____

POSTAL CODE _____ PHONE # _____

EMAIL _____

APPLICANT NUMBER #2

Please indicate which events you are entering. Crib is a team event, Euchre is an individual event.

CRIBBAGE _____ EUCHRE _____ BOTH _____

PLEASE PRINT

NAME _____ LOCAL UNION _____

ADDRESS _____ CITY _____

POSTAL CODE _____ PHONE # _____

EMAIL _____



PLEASE READ CAREFULLY

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

BY SIGNING THIS DOCUMENT YOU WILL WAIVE CERTAIN LEGAL RIGHTS INCLUDING THE RIGHT TO SUE OR CLAIM INDEMNITY AGAINST Unifor AND ANY OF ITS LOCALS OR THEIR RESPECTIVE OFFICERS, AGENTS, EMPLOYEES OR REPRESENTATIVES.

ASSUMPTION OF RISKS

I am aware that my participation in this recreational activity held **MARCH 3, 2019** involves risks and dangers including but not limited to use of and/or exposure to sporting and/or recreational equipment, natural or "person" made, environmental and/or physical conditions, negligence of others, and/or negligence on the part of the **Unifor** and/or its Local Unions, their officers or agents and representatives. I freely accept and fully assume all such risks and dangers and the possibility of personal injury, death, property damage and loss resulting therefrom.

1. **I AGREE TO WAIVE ANY AND ALL CLAIMS** that I have or may in the future against the **Unifor** Union and/or **Unifor** Local Unions and/or a **Unifor** Council, and their directors, officers, employees, against and representatives, (all of whom are hereinafter collectively referred to as "**THE RELEASEES**") and **TO RELEASE THE RELEASEES** from any and all liability for any loss, damage, injury or expense that I may suffer, or that my next of kin may suffer as a result of my use of or my presence at the **Unifor** Union and/or Local Union and/or Council recreational event due to any cause whatsoever, **INCLUDING NEGLIGENCE, BREACH OF CONTRACT, OR BREACH OF ANY STATUTORY OR OTHER DUTY OF CARE, INCLUDING ANY DUTY OF CARE OWED UNDER THE OCCUPIERS LIABILITY ACT, ON THE PART OF THE RELEASEES;**

2. **TO HOLD HARMLESS AND INDEMNIFY THE RELEASEES** from any and all liability for damage to property of, or personal injury to, any third party resulting from my participation at the **Unifor** and/or Local Union and/or Council recreational event;

3. This agreement shall be effective and binding upon my heirs, next of kin, executors, administrators, assigns and representatives, in the event of my death or incapacity;

In entering into this agreement I am not relying upon any oral or written representations or statements made by the Releasees other than what is set forth in this agreement.

I have read and understand this agreement. I am aware that by signing this agreement I am waiving certain legal rights, which I or my heirs, successors, executors or administrators etc. may have against the Releasees.

PLEASE NOTE: This waiver must be completed by the PARTICIPANT and accompany application.

Signed this _____ day of _____ 2019

Print name clearly

Signature of participant

Participant (1) _____

Participant (2) _____
