



SOUTH EASTERN ONTARIO RECREATION COUNCIL

REGIONAL 10 PIN BOWLING QUALIFIER SUNDAY JANUARY 20th, 2019

**LEISURE BOWLING LANES: 728 CHAMPLAIN AVENUE, OSHAWA ON
(905) 579-4411**

**OPEN TO UNIFOR MEMBERS AND THEIR SPOUSES FROM LOCALS WITHIN THE
SEORC REGION.**

**Affiliated with the UNIFOR National Team Finals to be held Saturday
April 27th, 2019 in St. Catharines, ON at Parkway Lanes hosted by GHRC
C.T.F. MORAL SUPPORT SANCTION**



**STARTING TIME 1:00 P.M. SHARP
SIGN-IN 12:00 P.M.**



CTF #	Print Line-up of Team in Bowling Order Show Full Name - PLEASE PRINT	Highest League Average	Women	Men	DO NOT USE	LOCAL Union
	1.					
	2.					
	3.					
	4.					
	5.					

FOR FURTHER INFORMATION CONTACT: **Steve Hunter (905) 623-8007**

DEADLINE FOR ENTRIES – January 14, 2019

Important - Read Rule #12

OFFICE USE - DO NOT USE Amount Rec'd..... Cheque No. Money Order Team	TEAM EVENT - \$26.00 PER PERSON TOTAL TEAM FEE\$130.00 *5 Players Per Team* (Entry fee must accompany entry) (NO PERSONAL CHEQUES) Fee includes: Prize fee of \$11.00 Bowling fee of \$12.50 Tournament fee of \$ 2.50 Certified Cheque or Money Orders ONLY payable to: S.E.O.R.C. Mail to: REGIONAL BOWLING QUALIFIER Steve Hunter c/o UNIFOR Local 222 1425 PHILLIP MURRAY AVENUE Oshawa, ON L1J 8L4
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Captain's Name:

Local:

Address:

E-mail:

City & Postal Code:

Phone:



RULES AND REGULATIONS - UNIFOR 10 PIN BOWLING



1. Entry limited to UNIFOR members and their immediate family. 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.
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 2017 – 2018.**
5. Bowler will use highest league average of **TWENTY-ONE GAMES OR MORE** as of December 31, 2018. All other bowl scratch - Men 180, Women 165.
6. 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 2017 - 2018 average. **CURRENT SEASONS 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. Handicap basis - 85% (difference between average and 1,050 added to game score, no fractions).
11. The number of team qualifiers allowed in the affiliated UNIFOR tournament will be based on a ration of **ONE** for every **FIVE** entries and fraction thereof.
12. **IT SHALL BE EACH BOWLERS RESPONSIBILITY TO VERIFY HIS/HER AVERAGE, WHETHER ORIGINALLY SUBMITTED BY THE BOWLER, HIS/HER TEAM CAPTAIN OR OTHERS. MUST HAVE YOUR BOOK...OR PROOF OF LEAGUE AVERAGE.**
13. Tournament Committee reserves the right to re-rate averages that are questionable. If re-rated average is not accepted by bowler, entry fee is refundable. ****All re-rating must be done prior to bowling.****
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.

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 **(SEORC Regional 10 pin Bowling Tournament)** to be held **(January 20th, 2019)** (the "Activity") to be held at **(Leisure Bowling Lanes in Oshawa)** (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.