

## "CREATING SAFE SPACES FOR WOMEN"

## 2008 WOMEN'S CONFERENCE DECEMBER 4 – 7, 2008

#### **Conference Agenda**

Sisters attending this Conference will hear from speakers about women's experiences of violence from different perspectives – e.g. aboriginal women, racialized women, women with disabilities, lesbian, bisexual and trans women. We will have the opportunity to discuss strategies to combat violence in our workplaces and in our communities. Sisters will also have the opportunity to develop personal and collective Action Plans.

On Saturday, December 6, the National Day of Remembrance and Action to End Violence Against Women, we will have a special remembrance ceremony that morning followed by lunch and entertainment together. That evening, Sisters will have the opportunity to attend the annual December 6<sup>th</sup> Vigil.

A more detailed Conference Agenda will be available in coming weeks.

### Childcare

If there is sufficient demand, we will provide on-site childcare for Sisters attending the Conference. Requests for on-site childcare must be received no later than <u>Monday</u>, <u>November 10<sup>th</sup></u> and delegates will be advised of the decision as quickly as possible.

#### **Election Process**

In accordance with the Constitution of CUPE Ontario, the 2008-2010 Women's Committee will be elected at this Conference.

Delegates must be from affiliated Locals in order to be eligible to vote and/or to stand for a position in this election. Those interested in standing for a position must have their Local's support to do so.

Five positions will be filled by caucus elections – Racialized Women, Aboriginal Women, LBT Women, Women with Disabilities and Young Women. These caucuses will be held on Friday, December 5<sup>th</sup> at different times during the day. Delegates must self-identify as a member of a particular caucus in order to participate in these elections.

Five positions will be filled by an "at-large" election on Sunday, December 7<sup>th</sup>. All affiliated delegates will be eligible to participate in this election.

#### **Registration Fees**

\$150 for affiliated Local Unions; \$245 for non-affiliated Local Unions, includes lunch on Saturday. The surcharge of \$95 for non-affiliates can be applied to the first per capita payment if a local joins the Ontario Division within three months.

COPE491/dm



# REGISTRATION FORM

## 2008 WOMEN'S CONFERENCE DECEMBER 4 – 7, 2008

PHONE NO.	E-MAIL ADDRESS
	PHONE NO.

## ► REGISTRATION FEE FOR 2008 WOMEN'S CONFERENCE:

Affiliates	*\$150.00 X	= \$	fe	*Registration fee includes
Non-Affiliates	*\$245.00 X	= \$	-	lunch on Saturday
affiliates can be ap	of \$95.00 for non- oplied to the first per local joins the Ontario (3) months.	TOTAL: \$	=	

### ► PLEASE CHECK IF APPLICABLE:

I am interested in on-site childcare for \_\_\_\_\_ (#) child(ren).

Please return this registration form along with your cheque made payable to **CUPE Ontario - 2008 Women's Conference** to:

# CUPE Ontario Regional Office - 2008 Women's Conference <u>Attention: Deborah Morris</u>

#### 305 Milner Avenue, Suite 800 Scarborough, ON M1B 3V4

A block of rooms has been set aside at the **Metropolitan Hotel** located at 108 Chestnut Street, Toronto, ON (<u>www.metropolitan.com/toronto</u>). We suggest that you reserve your rooms immediately by calling **W.E. Travel** at **1-888-676-7747**. Please identify that you are booking for the **CUPE Ontario Women's Committee Conference** to ensure you receive our special standard room rate of \$139.00/night plus tax for single/double occupancy. Hotel accommodations must be made no later than <u>November 10, 2008</u>.

TELEPHONE #\_\_\_\_\_

LOCAL NO.

ADDRESS: \_\_\_\_\_

SIGNED (by Recording Secretary)



# **Family or Dependent Care Subsidy**

## Name of Claimant:

Local No.

**CUPE only reimburses expenses in excess of regular fees.** (e.g. if your regular fees are \$30.00 per day and attendance at the CUPE function requires you to pay \$40.00, you would therefore claim the "excess fee" of \$10.00). **You may claim up to \$50.00 per day** – *receipts must be attached.* Please indicate the dates for expenses incurred, and the **excess** daily cost.

Name of Function or Conference: 2008 Women's Conference (December 4 – 7, 2008)

	DATE	COST (per da	y)
	TOTAL	\$	
	Cheque to be made payable to:	Claimant	
Mailing Add	ress:		
<u> </u>	(1)		
Signature of Claimant	(2)		signatures of 2 officers of the Local,
This form must be comp	bleted & forwarded to:		one of whom is not the claimant
CUPE Ontario Regional 305 Milner Ave., Suite 8	l Office (Attention : Deborah Morris) 00	(	Cheque #
Scarborough, ON M1B (T) 416-292-3999 x229 /	3V4	Ι	Date:



# ACCESS REQUEST FORM

## (Please fill out this form for <u>each</u> delegate)

Local No			
(Please print or type) Name of Delegate:			
Address:			
		Postal Code	
Telephone: (home)	(office)		
Email:			
Please check service(s) required	(All services will be paid	for by CUPE Ontario):	
Guide/Personal Assistance	Provide own	Required	
		Hotel	Event
ASL Interpretation			
Wheelchair / scooter acc	ess		
Assistance at check in/Registration			
Assistance in case of evace of			
Alternative Communication	on		
French Translation			
Real Time Captioning			
Alternative Media Large Print (Fo	ont Size)		
Materials in advance			
Electronically			

- 2 -

Serious allergy alert (Please specify) \_\_\_\_\_

Will you require any other accommodations at the event? (Please specify)

Will you require any other accommodation at the hotel (such as TTY, visual alarm,

etc.) (Please specify)

Other services? (Please specify)

Please complete and return by **November 10<sup>th</sup>** to:

CUPE Ontario Access Request Attention: Deborah Morris 305 Milner Avenue, Suite 800 Scarborough, ON M1B 3V4 (T) 416-292-3999 / (F) 416-292-2839