

Pilot of the CLC Becoming a Disability Rights Activist Course
sponsored by the CLC Disability Rights Working Group and CLC Education
November 29th & 30th, 2011, Hyatt Regency, Toronto, ON

Participant Registration Form – Registration Fee: \$75.00

Registration, accessibility needs and hotel deadline is November 4th, 2011

Last name: _____ First name: _____ Female ☐
Male ☐

Union: _____ Local: _____

Mailing address: _____

City: _____ Province: _____ Postal code: _____

Telephone () _____ () _____
Work Home

Fax: () _____ () _____
Work Home

Email: _____

Role in the union: _____

Your interest in this course: _____

Yes, I self identify as a person with a disability or as an injured worker

***** Please note this course is only for participants who self-identify as a person with a disability or as an injured worker, this is not a course for allies.**

Accommodation

Participants are responsible for booking their own accommodation and transportation arrangements and covering those costs. Participants are also responsible for covering meal costs except for lunch which will be provided by the CLC on both days. The course will begin at 9:00am and go until 4:30 for both days.

Guest rooms are available at a preferred rate of \$159.00 single/double occupancy pre-taxes at the Hyatt Regency Toronto Hotel. Please contact the Hotel on 416-343-1234, or 1-800-233-1234 and ask for the "CLC Disability Rights Course" block and rate. Course attendees are strongly encouraged to stay at the Hyatt Regency Toronto as it reduces the overall cost of holding this meeting. The hotel is located at: 370 King St. West, Toronto, ON.

The deadline for reserving at this preferred rate is Friday, November 4th, 2011.

Accessibility Needs:

Do you require course material in an alternate format?

Yes No

If yes, please specify the type of alternate format:

CD/USB key

Braille

Large print (16 pt)

Larger print size Point size required: _____

Other: _____

Do you require:

Sign language interpretation? ASL QSL

Real-time captioning?

Any other accessibility needs? (please specify)

Self Identification

The information requested below will assist the CLC Education Department in assessing the representative diversity of the course. All information will be kept confidential. Completion of this section is optional.

1. I am a person with a disability or an injured worker.
2. I am, by virtue of my race or colour, a worker of colour.
3. I am an indigenous (Aboriginal) person of North America.
4. I am: male female
5. I am: lesbian gay bisexual transgender

Please let us know if you have any special dietary requirements: _____

Please let us know if you will have any other special accessibility needs on site:

DEADLINE: November 4th, 2011 - Please fax, email or mail your completed registration form and the \$75.00 registration fee (cheque payable to the CLC) to:

Education Department
Canadian Labour Congress
2841 Riverside Drive, Ottawa, ON K1V 8X7
Ph: 613-521-3400 Ext 555 — Fax 613-521-4655
Email: education@clc-ctc.ca

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