

January 28, 2016

**To All Local Union Executives and WSIB Activists,**

You are invited to attend the upcoming USW District 6 WSIB Symposium in Hamilton, ON from May 29-31, 2016 at the Sheraton Hotel.

The purpose of this symposium is to bring together USW WSIB activists to discuss current issues affecting our workplaces. Injured workers are facing significant cuts and denials to their benefits, struggling to navigate through this complicated and unjust system. Our goal is to build our union's network and share knowledge and resources.

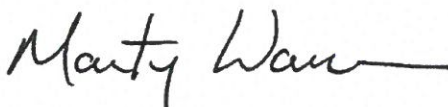
This event is open to all local union WSIB activists, and anyone interested in learning more about the complex WSIB system. It is an important opportunity to share and learn more about current issues and challenges, including how to navigate the complex appeals process.

Participants will hear from dynamic and engaging experts in the WSIB field. There will be tools and resources for you to take away and time for questions & answers.

In addition to learning the latest in WSIB policies, the appeals process and problematic sections of legislation and policy, the symposium is also a chance to come together and network with other District 6 activists.

Looking forward to your participation!

In Solidarity,



Marty Warren  
USW District 6 Director



Sylvia Boyce  
USW District 6 Health and Safety Coordinator

cc Jim Pasel, Coordinator, USW Injured Workers' Program  
Ken Neumann, Canadian National Director  
Tony DePaulo, Assistant to the District 6 Director  
Nancy Hutchison, CNO HSE Department Leader  
Gerry Leblanc, CNO HSE Department  
District 6 Staff and Support Staff

## SYMPOSIUM INFORMATION

- Agenda:** Will be provided upon registration
- Registration:** Sunday, May 29, from 4 pm - 6:00 pm (Kings Court Foyer)  
Monday, May 30, from 7:30 am - 9:00 am (Kings Court Foyer)
- Opening:** Sunday, May 29, from 7 pm - 8:00 pm (Heritage Room)  
  
Monday, May 30, from 9 am - 5:00pm (Heritage Room)  
Breaks and Lunch provided
- Hospitality:** Sunday, May 29, from 8 pm - 11:00 pm  
Beckett Room
- Adjournment:** Tuesday, May 31 at 12:00 pm (Heritage Room -am break provided)
- Location:** **Sheraton Hamilton Hotel**  
**Heritage Room**  
116 King St. W., Hamilton, ON L8P 4V3  
Tel.: (905) 529-5515 • Toll free: 1 888-963-2975
- Hotel:** **Sheraton Hamilton Hotel**

**Room rate:** \$119 single/double occupancy with a Queen or King bed, plus applicable taxes. Rate includes basic Wi-Fi internet for all guests in their room.

When making your reservations, please indicate that you are attending the **USW WSIB Symposium** to receive the above rate.

**Parking:** daytime rate of \$10 daily, \$3 after 6:00 pm and \$2 per half hour anytime. Overnight parking is \$10.99 + tax with in/out access. Please note there is a 6ft height clearance on our underground lot.

Delegates are responsible for making their own hotel arrangements.

**Deadline to book a room is May 2, after that, based on availability.**

- Registration fee:** \$100.00 per delegate  
**Registration deadline is April 15**  
**Cheque payable to:** "USW District 6" – memo: WSIB Symposium



## REGISTRATION FORM

Local Union #: \_\_\_\_\_ District: \_\_\_\_\_ Contact ph. #: \_\_\_\_\_

NAME	LOCAL (if applicable) and/or WORKPLACE	ADDRESS
Email:		
Email:		
Email:		
Email:		

**Registration deadline is April 15, 2016**

**Registration is not limited. If you are registering more than four people, please copy this form.**

LU President: \_\_\_\_\_ LU Recording Secretary: \_\_\_\_\_  
*Signature* *Signature*

Registration fee is \$100.00 per delegate x _____ Total number of delegates = \$ _____
<b>Amount enclosed \$</b> _____

**Please make cheques payable to "USW District 6" – memo: WSIB Symposium**

**Send registrations by mail to:**

United Steelworkers, District 6 Office Attn: Amanda Neale  
300-200 Ronson Drive, Etobicoke, ON M9W 5Z9

Or by fax to: (416) 416-243-9573 (mail cheque with original form)

## SPECIAL NEEDS FORM

### DIETARY RESTRICTIONS

NAME(S) OF DELEGATE	Dietary Restrictions

### ACCESS & SERVICES FOR THOSE WITH DISABILITIES:

What is your type of disability?      Mobility impaired ☐  
 Use of a wheelchair ☐      Blind or visually impaired ☐  
 Deaf or hearing impaired ☐      Other (please specify) \_\_\_\_\_

**MATERIAL IN ALTERNATE MEDIA:**      Yes ☐      No ☐

*If yes, please specify type:* \_\_\_\_\_

NAME OF DELEGATE	TELEPHONE NO.
	Home: _____
	Work: _____

Local Union No. \_\_\_\_\_

**To be submitted with Registration Form by April 15, 2016**