

OIRCA
50th Anniversary Gala Dinner and Dance
Friday, January 24, 2014

You're invited to join OIRCA as we celebrate our 50th Anniversary with an evening of dinner and dancing at the Westin Bristol Place Hotel, Toronto.

Each member company will receive 2 complementary tickets!
Additional tickets may be purchased using the registration form on the reverse.

The evening will include recognition of the Founding Members of the Association and our Guest of Honour will be
Mr. Joe Minialoff
the Association's first President.

Reception: 6:00 PM

Dinner: 7:30 PM

Attire: Business Formal

Formal photo gift will be taken between 6:00 and 7:30 PM



Dance the night away with this 10 piece party band.
Killer horn section, great vocals and a dynamic rhythm section who authentically recreate the best of R&B, Classic Rock, Funk, Disco, Soul and Blues.

The Association has a block of rooms available at the Westin Bristol Place Hotel, 950 Dixon Road Toronto until January 2, 2014, at a rate of \$119.00 (which includes overnight parking). For members staying at the hotel and travelling to Hawaii the bedroom rate is \$139.00 and the hotel is offering free parking for the week. If you are not booking a room but are travelling to Hawaii and would like to park your car at the hotel, the fee would be \$50.00 for the week. There is free shuttle service to and from the hotel and airport.

To book your room call 1-800-937-8461 and let them know you are with the OIRCA AGM/50th Anniversary Gala or book online at:

<https://www.starwoodmeeting.com/StarGroupsWeb/res?id=1303127236&key=31C4F>

Ontario Industrial Roofing Contractors Association

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1-888-33 OIRCA (336-4722) web: www.ontarioroofing.com e-mail: oirca@ontarioroofing.com



REGISTRATION FORM

Name: _____

Company: _____

Address: _____

Telephone: _____ Fax: _____

Email: _____

*We will be attending the Gala Dinner & Dance **2 Tickets @ \$250.00 =Complementary****
*(**Complementary tickets to OIRCA members only)*

*We require additional tickets _____ Tickets @ \$250.00 = _____

HST (107798035) _____

Total: \$ _____

- _____ Payment Enclosed -OR- _____ Visa _____ MasterCard

Credit Card Number: _____

Name on Card: _____

Expiry Date: _____ Signature: _____

*Please list the names of those attending the Gala:

Please advise us of any dietary restrictions.