



ABC 2018

Companions' Checklist



Name:		Delegate's Name:		
Email:		Please indicate any dietary requests:		
DATE & TIME	ACTIVITY	PER PERSON	✓	\$
Please indicate which events you will attend:				
SUNDAY, JUNE 17, 2018				
8:00 am	OPTIONAL: Early Bird Stroke Play Big Sky Golf Club (40 spots reserved)	\$130		
Do you require club rentals: Big Sky Golf Club? <input type="checkbox"/> Right handed <input type="checkbox"/> Left handed		\$47		
10:00 am - 2:00 pm	OPTIONAL: Britannia Mines Tour and Lunch	\$130		
1:00 pm - 3:00 pm	OPTIONAL: Valley Cycling Tour	\$135		
6:15 pm - 10:00 pm	Welcome to Whistler Reception & Dinner	Included		
MONDAY, JUNE 18, 2018				
6:00 am - 6:45 am	Morning Wake Up Jog	Included		
6:00 am - 6:45 am	Morning Wake Up Walk	Included		
7:30 am - 8:30 am	Combined Delegates' & Companions' Breakfast with Michael Allen	Included		
8:30 am - 11:45 am	Companions Tour: Peak to Peak Gondola Tour	Included		
12:30 pm - 5:30 pm	OPTIONAL: 7th Annual Ed Hardison Memorial Golf Tournament (Delegates & Companions) at Fairmont Chateau Whistler Golf Course (lunch included) (80 spots reserved)	\$193		
Do you require club rentals: Fairmont Chateau Whistler Golf Course <input type="checkbox"/> Right handed <input type="checkbox"/> Left handed		\$73		
12:30 pm - 4:30 pm	OPTIONAL: Whistler Cultural Tour	\$64		
1:00 pm - 3:00 pm	OPTIONAL: Eco Zip Trekking on Whistler Mountain	\$150		
7:00 pm - 10:30 pm	Fun Night Reception & Dinner	Included		
TUESDAY, JUNE 19, 2018				
6:30 am - 7:15 am	Morning Wake Up Jog	Included		
6:30 am - 7:15 am	Morning Wake Up Walk	Included		
8:00 am - 9:15 am	Combined Delegates' & Companions' Breakfast with Speaker: Dr. John Izzo	Included		
9:30 am - 10:15 am	86 th Annual General Meeting	Included		
10:45 am - 12:00 pm	Keynote Speaker: John Furlong	Included		
1:00 pm - 3:30 pm	OPTIONAL: Whistler Tasting Tour and Lunch	\$135		
6:00 pm - 11:00 pm	Chairman's Reception, Banquet & Entertainment	Included		
PAYMENT METHOD		Subtotal		\$
		Plus 5% GST		\$
<input type="checkbox"/> CHEQUE <input type="checkbox"/> MASTERCARD <input type="checkbox"/> VISA		GST/HST# 106861669 RT0001		\$
		TOTAL PAYMENT		\$
Card Number:		Expiry Date: / /		CVV#
Card Holder Name:		Signature:		
PLEASE RETURN TO GEETA PERSAUD				
Email: g.persaud@ciph.com Fax: 416-695-0450				