

LEVEL 100 COURSE



Directors' Course: Introduction to Condominiums

Saturday, June 17, 2017 / 9:00 a.m. to 12:45 p.m.

Holiday Inn Burlington Hotel & Conference Centre / 3063 South Service Road, Burlington, ON

Saturday, June 24, 2017 / 9:00 a.m. to 12:45 p.m.

Bingeman's / 425 Bingemans Centre Drive, Kitchener, ON

Course Outline

Topics covered in this course will include:

Getting Started

- Condominium Terminology
- History of Condominiums
- Types of Condominiums

Director Responsibilities

- The Act, Declaration, By-Laws, Rules and Policies
- Enforcement of Governing Documents
- Meetings
- Owner Expectations, Communications and Complaints

Property Management

- Self-Management
- Direct Hire
- Property Management Contract
- Best Practices of Governance
- Responsibilities and the Board's Role

Planning, Financial and Other Responsibilities

- The Annual Plan
- Money and Banking
- Cheque Signing
- Financial Statements
- Status Certificates
- Reserve Funds
- Insurance
- Legislation Affecting Condominiums

TABLE TOP DISPLAY INCLUDES: (Maximum 10)

- One (1) 6' Draped Table along perimeter of the room
- Your company logo on the sponsor screen
- Your company logo on course session/event promotional e-blast to members/non members
- Recognition from the podium by our course/event presenters
- Your company logo on the event survey

PLEASE REGISTER ME FOR:

- June 17, 2017 in Burlington** **June 24, 2017 in Kitchener**

REGISTRATION INCLUDES:

- Continental Breakfast
- Refreshment Break
- Course Manual

Early Bird Pricing . . . \$40

Register by June 1st

Regular Pricing \$50

Non-Members \$65

Table Top Display . . . \$250

SUBTOTAL _____

+ 13% HST _____

TOTAL _____

Name _____
ONLY ONE NAME PER FORM. PLEASE COPY FOR ADDITIONAL NAMES. PLEASE PRINT FULL NAME.

One name per form.
Please make copies for additional registrants.
Send your forms via:

Company / Condo: _____

Billing Address: _____

City: _____ Prov: _____ Postal Code: _____

Telephone: _____ Email: _____

Paid \$ Cheque Visa MasterCard

Card Number: [][][][][][][][][][][][][][][][] Expiry (mm/yy): [][][][][][]

Cardholder Name _____ Signature _____

Cardholder will pay to the issuer of the charge card herewith the amount stated herein in accordance with the issuer's agreement with the cardholder.

MAIL:
CCI Golden Horseshoe Chapter
Box 37,
Burlington, Ontario L7R 3X8
or FAX: 416-491-1670
or EMAIL: admin@cci-ghc.ca
or REGISTER ONLINE:
www.cci-ghc.ca

For more information on any of our courses, go to www.cci-ghc.ca