



The 22nd Annual
Herb Bradley



CLASSIC



A FUND RAISING SKI/SNOWBOARD RACE

benefiting the Vancouver Island Society for Adaptive Snowsports (VISAS)

Funds raised will help improve the quality of life of people with disabilities by teaching them to ski.

THE RACE

On **Sunday, February 7th, 2010** the **22nd Annual Herb Bradley Coca Cola Classic** will take place at Mount Washington Alpine Resort. As a Vancouver Island business you are invited to participate in this fun and worthwhile event by entering one or more teams.

Your team will consist of three of your staff members, and a disabled skier to be chosen on race day by a member of the VISAS. The race will be run in a dual slalom format.

Each team entered receives:

- Take home memorabilia
- Buffet lunch
- All day lift tickets
- A chance to win draw prizes and awards



DOES YOUR COMPANY HAVE A MASCOT?

**IF SO, BRING THEM ALONG TO RACE AND ENTERTAIN THE CROWDS.
PRIZES WILL BE AWARDED - FOR THE MOST ENTERTAINING MASCOTS.**

Cut along line to detach entry form

Entry Form

Send completed form along with \$250.00 to:
Vancouver Island Society for Adaptive Snowsports
Filberg Centre, 411 Anderton Ave., Courtenay, BC Canada V9N 6C6

For more information: www.visasweb.ca



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SCHEDULE OF EVENTS

Sunday, February 7th, 2010

- 8:00 am Registration begins on Marmot Level
- 10:00 am Registration closes, race begins
- 11:30 am Buffet Lunch on Marmot Level
- 2:30 pm Awards Ceremony on Marmot Level

How To Register

- Enter early, race is limited to 50 teams and fills up fast.
- Fourth team member (disabled skier) can be requested in advance or will be assigned at the starting line.
- Every team is asked to donate one draw prize (approx. \$50 value)
- Every team must register at the registration desk on the morning of the race
- Every team must sign a Mount Washington waiver before receiving their race info package

Mail or deliver \$250.00/team by February 7th, 2010
(cheques made payable to VISAS) to:
411 Anderton Ave, Courtenay, BC V9N 6C6

Please complete the entire form

Cut along line to detach entry form

Company Name: _____

Team Member Names:

Contact Name: _____

1) _____

Address: _____

2) _____

City: _____ Postal Code: _____

3) _____

Contact Phone: _____

4) A skier with a disability will be assigned to your team, or you can request a specific student in our program.

Email: _____ Mascot: _____