

2008 SKI-DOO X-TEAM SNOCROSS SCHOOLS



Eastern School

October 25, 2008

Holiday Inn
6555 Old Collamer Road S
E. Syracuse, NY 13057
PH: 315-437-2761
Special room rate code: BOM
<http://www.holiday-inn.com/syr-i90>

Registration: 8-9 a.m.
Session: 9 a.m. - 4 p.m.

- 2009 MXZx 600 RS XP
- 600cc Mod Performance kit
- Fuel and Air system
- Clutch & Drive Systems - Tuning
- Suspensions Systems – Tuning
- KYB C-40 shocks
- Tracks and traction
- Race Day Tuning Strategies
- Data Acquisition

Midwest School

November 1, 2008

AmericInn Hotel & Suites (Mermaid Event Center)
2200 Highway 10
Mounds View, MN 55112
PH: 763-786-2000
Special room rate code: 51631
<http://mermaidminnesota.com>

Registration: 8-9 a.m.
Session: 9 a.m. - 4 p.m.

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Cost of the schools is \$75 USD per person and includes continental breakfast, hot buffet lunch, 2009 Ski-Doo X-Team Race Manual and various technical handouts. **Pre-registration is required by deadline date.**

The Ski-Doo parts support truck will be selling parts, clothing, and accessories at each school for the convenience of the racers. Representatives from aftermarket companies specializing in performance Ski-Doo parts will also be on hand to answer questions regarding their products. Major race circuits will be also available to assist with race registrations and answer questions.

Special room rates are available at each site by mentioning Ski-Doo/BRP and the code # when making your reservation.

Mail your registration and payment to the address below. **DO NOT MAIL TO THE HOTEL.** Payment should be a personal or business check made to BRP, Inc. [no credit cards]. Faxed registration forms without payment will not be accepted. Seating is limited and spaces will be filled in the order the registration/payment is received – so return your registration promptly.

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RACE SCHOOL REGISTRATION FORM

I will attend (check one only)

Eastern DEADLINE: OCT. 17

Midwest DEADLINE: OCT. 24

Mail Form and Check to:

BRP US Inc.
2009 Ski-Doo Race School
24078 Greenway Rd, Ste #4
Forest Lake, MN 55025

PLEASE PRINT CLEARLY

Name: _____

Address: _____

City: _____ State: _____ Zip _____

Phone: _____ Fax: _____

E-mail Address: _____

ONLY ONE PERSON PER REGISTRATION FORM