DEGAL DRESS

November 83

NOVEMBER MEETING November 21 at 7:30 MEET AT THE TOWER at Kalamazoo Valley Community College

TOPIC: Election of Officers for 1984 Come and Vote and Volunteer!!

NOVEMBER RIDE SCHEDULE

Saturday November 5 1:30 from Kalamazoo Academy School at Milham and Sprinkle, 15-30 miles Phil Caruso 381-0135

Sunday November 6 2:00 from Kalamazoo Valley Community College 15 to 30 slightly rolling miles Sandy Kimbrough

Saturday November 12 10 AM from Spring Valley Park on Mt. Olivet. Meet at the Water Tower. 10-15 slightly rolling miles Al Holmes

Saturday November 19 10 AM Pavillion Township Park at Q & 29th Street 20-50 miles Jan McLain

Sunday November 20 2:00 PM Schrier Park on Osterhout Road 20 miles, Dave Hageman

Saturday November 26 THANKSGIVING PATCH RIDE 10:30 from Kalamazoo Academy School at Sprinkle and Milham 15-20 miles Jan Hageman

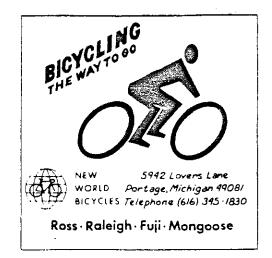
Sunday November 27 2:00 PM Comstock North Elementary School H & 26th 10-12 rolling miles Jini Caruso 381-0135

RENEW NOW

Those of you who joined before September: Your membership expires after the December Newsletter.









FOR SALE

Motobecane Tandem, 22/21 Mixte rear. TA Triple cranks, Shimano derailleurs, Weinman Concave rims. Rear Blackburn rack. Brand new black and red paint job. Asking \$750. Call Scot McLain, 327-2256. Give it a try with a test ride.

Schwinn Paramount Road Bike Campy Crankset and Front Derailleur, Suntour Rear, New Bottom Bracket. New paint and decals by Schwinn \$875. Call Mike Kiefer 345-5232.

Raleigh Competition with sewups and extra wheels and tires \$350, Call Mike Kiefer 345-5232.

MILWOOD SCHWINN CYCLERY, INC.

1015 E. CORK St.

PR 240_4254



CLUB OFFICERS - 1983

PresidentScot McLain	327-2256
Vice President	323-1051
Secretary-TreasurerJan McLain	3 2 7 - 2 2 5 6
Newsletter EditorPhil Caruso	321-0125
Road CaptainJini Caruso	301-0135
LibrarianJune Godfrey	3404707
Race InformationTerry Florian	275 0605
Race PromoterBrian Richards	2/0 2/0/
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membership form

MEMOEISNI PLEASE PRINT	p torm	Kalamazoo S	Bicycle Glub	
Name		DUES (check o	ne)	
Address		Adult Mem	bership	\$6.00
City <u>·</u>	STATEZI	Family Me Yourn (17	•	\$8.00 \$4.00
Phone	Birthdate	Senior (6	O or older)	\$4.00
For family membership, <u>Name</u>	please list enti <u>Birthdate</u>	e family:NEW	MEMBER	
		REN	EWAL	

Signature__ (if under 18) Parent Signature___

Mail to:

KBC Box 527 -

Kalamazoc, MI 49005

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