



Sandy Bridges' Recognition Reception And Dinner

June 7, 1997

Duluth Entertainment and Convention Center

*"Uncommon Vision,
Leadership and Creativity"*

You are cordially invited to join
family, friends and professional colleagues of

SANDY BRIDGES

in recognition of his uncommon
vision, leadership and creativity
for over a quarter century
as the Director of the Charles L. Sommers
Wilderness Canoe Base
and
Northern Tier High Adventure Program.

JUNE 7, 1997

Duluth Entertainment and Convention Center

Afternoon Reception at 3:30 p.m.

Recognition Dinner at 7:00 p.m.

Tickets must be purchased in advance
for the Recognition Dinner at \$25 per person.

Sandy Bridges' Retirement Fund

On a winter's day at the Base, directors of the Sommers Alumni Association and Northern Tier Committee members discussed Sandy's unfortunate, untimely and costly illness. Coupled with the financial strains imposed by early retirement, it was determined that creating a special "retirement fund" would be an appropriate and useful gift. For Sandy's friends, professional colleagues and SAA members wishing to make a contribution, please send your checks, payable to the "Sandy Bridges' Retirement Fund" to SAA, P.O. Box 428, Ely, MN 55731, Attn: Sandy Bridges' Retirement Fund, for direct deposit. A list of all contributors' names will be kept for acknowledgments.

Memory Book

The SAA is soliciting submissions for a memory Book to be assembled during the Alumni Work Week at the Base, May 24 - June 7. Submissions can be in the form of written recollections, letters, photos, newspaper articles and other printed historical memorabilia. Please send your submissions to the SAA, P.O. Box 428, Ely, MN, 55731, Attn: Memory Book, for receipt no later than May 26, 1997.

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The reception at 3:30 p.m. in recognition of Sandy Bridges is open to everyone. Seating for the recognition dinner at 7:00 p.m. is limited and tickets must be purchased by mail in advance at \$25 per person. Please return this completed card and a check payable to the "Sandy Bridges' Recognition Dinner" in the enclosed return envelope. Tickets are not required for the afternoon reception.

Number of persons attending _____

_____ Reception and Recognition Dinner

_____ Recognition Dinner only

_____ Reception only

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ (day) _____ (evening)

*Please contact Ms. Linnea Renner at First Aid for Camp Staffs (218) 365-4155
for further information or questions.*