

Thunderbird 2

By John Petrie

Thunderbird 2 operates out of the Thunderbird Community Centre in East Vancouver.

Exercise classes started in January, 2003 with an initial number of four participants and has since expanded to 15. The facility has a beautiful view of the North Shore mountains, and is ideally equipped for FITT/Healthy Heart activities. Warm-up and cool-down exercises (with music) are done in the gymnasium room. The weight-room downstairs allows access to cardiac equipment and also includes elliptical equipment useful in injured knee recovery. Regular exercises occur each Monday and Wednesday at 8:30 a.m.



Thunderbird 2, Exercise Therapist - Peter Matino

While training is serious, as usual, some humorous incidents do occur. It appears that during weight training two of the 80+ year old participants are constantly under the watchful eye of Exercise Therapist Peter Matino, since they are continually forgetting their age and usually attempt to overload the weight plates on the leg press machine.

One of these 80+ year olds suffers from a severe blood disorder, and swears that faithful attendance of the FITT/Healthy Heart program over the years is responsible for his on-going longevity (as well overloading the weights on the leg press machine)



Joseph Tam, is also an active member of the group. He is on the board of the Thunderbird Community Centre Association. John Petrie is the Class Rep. and as such is a member of the FITT board of directors.

The group as a whole are very pleased with the facility and feel that the staff are extremely accommodating.

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Cyclists Experience Dutch Hospitality at Heineken House Gears & Beers begroet Holland

Heineken House was set up at the Richmond Oval for the Winter Olympics in order to provide assistance to Dutch supporters, and aides from Holland and to provide a taste of Holland for Canadians and other foreign visitors to the games. Part of their goal was to provide transportation for their fellow country-men to and from the various Olympic Facilities. To this end some 400 bicycles were brought over from Holland and assembled at the Oval. Dutch passport holders were able to use

these as a means of transportation and recreation during the games, and the colourful yellow and blue bicycles became a familiar sight to Richmond residents on their bike paths and dykes through out the games.

On a damp dreary morning on February 23, twelve rabid cyclists and friends



At the O-Zone

Mission Statement

F.I.T.T. Cardiac Association's purpose is to facilitate a Healthy Heart Maintenance Program (after Hospital Cardiac Rehabilitation); to support the continuing Health, Welfare, Exercise, Knowledge, Medical and Social benefit of our members. Participation in this program will reduce hospital visits and improve the overall health of participants.



From Holland

from the Gears and Bears Cycling Club were able to experience the adventure of using these bicycles for a two hour cycling tour of Richmond. The brightly coloured yellow and blue bikes were quite a unique experience, in that they were single-gear cycles with no hand brakes. They all had a light generator built into the axle of the front wheel, were equipped with comfortable, adjustable saddles, and had security chains attached to the bikes. Each bike also came equipped with riding helmets. Obviously the skills we all learned on our childhood single-gear bicycles came to the fore, and while there were some interesting experiments at the beginning of the ride, the skill and expertise of the riders prevailed and no accidents, spills or crashes

were experienced.

Our tour took us around the Richmond Oval, past the unique Inukshuk figure created using old shipping containers and past the chrome Lenin head before hitting some of the regular Richmond bike paths. We must

have resembled a colourful flock of geese all following their leader as we received a lot of honks and hellos from passing motorists.

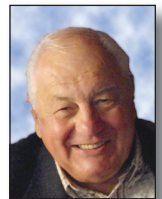
Following the ride and return of the bikes we all adjourned to Heineken House for food and refreshments via the V.I.P. entrance to the facility. We dined in the restaurant area of the facility and all tried traditional Dutch



In the Heineken House

dishes ("Ham & Pea" soup; or a mix of sauer kraut and creamed mashed potatoes with smoked sausage- hutspot) washed down with cool refreshing Heineken beer. A grand time was had by all.

Special thanks must be given to Ilario Galano, who worked tirelessly with several Dutch representatives of Heineken House to make this event happen. Of course the representatives of Heineken House deserve special thanks and praise for their graciousness as hosts in making us feel very welcome. It was truly a great experience and very much appreciated.



By Lloyd Rapchuk



Taking instructions from Jeffrey



Sherryl MacKaay

From the age of 4 Sherryl knew she wanted to be a Nurse and if she had to do it all again she would pick the same Profession- Sherryl feels so LUCKY she enjoys and is challenged by what she does.

Sherryl graduated in 1980 from the Royal Alexander School of Nursing. Nursing offers so much variety as long as you are willing to take courses and upgrade yourself, so that's what she did. She started out in The Intensive Care/ Cardiac Care Unit, then Emergency, next The Operating Room. She started out working casual at Eagle Ridge Hospital Healthy Heart. Holly

Kennedy-Symonds told her if she came to Burnaby General Healthy Heart she would never look back. Holly was right, Sherryl feels such passion for all the different elements of the Cardiac Rehab. Program (Heart Function Clinic/ Lipid Clinic/Healthy Heart).

Sherryl feels she has been blessed with a wonderful husband, Hans for 25 yrs. They have 2 great kids. Amanda 19 who is in her 2nd year at UBC, Ryen is 17 and in grade 12.

Sherryl loves nothing better than going for a walk along the Seawall with her husband and going for a latté. Sherryl treasures hanging out with her kids, watching her son play hockey, or baking

with her daughter. Sherryl grew up in Guyana (South America) and Dar-es-Salam (East Africa) as her parents were teachers there. This was the start of her love of travelling around the world and enjoying all the unique cultures.

Sherryl feels very privileged to work in an environment of clients who are trying to make positive changes in their lifestyle to improve the quality of their life!

The staff in Healthy Heart are ALL very passionate about what they do.

"Old" is when you are cautioned to slow down by the doctor instead of the police

Canadian, eh?

By George Kawaguchi

Eh, excuse me, Oops, sorry that I used the eh word. I'm Canadian and darn proud of it and I think that I had one of the best volunteer job during my 24 days.



The 2010 Winter Olympics brought out pride, fun, excitement, sorrow and hard work but I enjoyed every minute of it. Last fall, I was somewhat of a skeptic and also critical of the political and commercialization leading up to the games. I reminded myself that these games had a deeper meaning in terms of world peace through sport and my attitude changed to be positive and supportive.

After 10 days of training since May of last year and many hours of research, I still was unsure of what a NOC Assistant does. It soon became apparent that each day brought on new challenges and adventure. I was one of 4 NOC Assistants to the Republic of South Africa (RSA). No, I don't speak Afrikaans or Dutch but thank goodness Team South Africa all spoke English. We did everything from chauffeuring, problem solving, administrative work, technology specialist, gophers, and being the liaison between Vanoc and the RSA delegation.

Winter sports in South Africa? Yes it took me a while to find any information on the Internet on a country that is known for its summer sports. We didn't know who qualified until the week before the games.

Our team consisted of myself and 3 other NOC Assistants, the Chef de Mission, two athletes and two coaches (one athlete in Cross Country (Sprint) and the other in Alpine Skiing (GS) and a Manager of Team Preparation. Both athletes and coaches held South African passports but currently train and live in Germany and France).

In addition, the President of SA Sports

Confederation and Olympic Committee, CEO South African Sports and an IOC Executive member were here to support their athletes, attend IOC meetings and to promote the 2010 World Cup of Soccer (football held in South Africa this summer).

I learned a lot about the rebuilding process for South Africa after Apartheid and the challenges they face in the future. They are hoping that this summer's World Cup in South Africa will bring the country closer together (just like our Olympic games did for us). Our Chef marveled at the outpouring of national pride that was displayed by us Canadians and hopes that this will happen during their world cup as well.

Accommodations were tight at Whistler but fortunately I shared a small room at Blackcomb Lodge with an older couple and another older person and we were all very respectful of the small amount of space given to us. It was a place to sleep and at the end of a 10 -14 hour day, sleep was not a problem (even above the snoring).

I spent about 70% of my time at Whistler and the rest in Vancouver. I think I can drive that highway blindfolded based on the number of trips to and from Whistler. On sunny days, it was great, but on rainy dark evenings, it was tiresome.

We spent a lot of time in both the Whistler and Vancouver Olympic athlete Villages as well as many of the venues and met volunteers, athletes and great people from all over the world. There were differences between the two locations in terms of proximity to entertainment. In Vancouver, one could walk easily to the downtown core, whereas in Whistler, shuttle bus was the mode of travel.

Meals for the athletes and the workforce were quite different (the only similarity was McDonald's). The athletes had a variety of food choices (similar to going to the food court at Metrotown),

whereas the workforce had one of two choices (McDonald's or whatever they were serving for lunch or supper that day). I think the soup was the leftover from what didn't get served from the athletes' side the day before. Overall, the workforce meals were pretty good. However, I did have the opportunity to eat on the athlete's side at Whistler and Vancouver. It was interesting to see athletes from all over the world in their country colours as well Wayne Gretzky and Olympic medal winners.

Security was excellent for the Athletes village as well as the venues. The police, RCMP and the army were from all parts of Canada, and were friendly and always upbeat, especially at Whistler. I must have set the security systems off at least 35 times with my suspenders and Olympic pins.

I was very fortunate to get to see a lot of events with our Chef de Mission, at Whistler and in Vancouver. This was a perk that I did not anticipate and was very thankful for being included. I met many interesting people in the Olympic family sections of the venues. There are so many stories and situations that I encountered but Ilario asked me to keep this article short.

The 2010 Winter Olympics were a huge success, thanks to the visitors, Canadians, athletes, Vanoc and the many volunteers. Special thanks go to the volunteers that kept Cypress a viable venue (what an amazing job!).

The weather was amazing! Daffodils and cherry blossoms in February? What part of Canada are you from? If you are interested in viewing some videos that I shot during my down time, <http://gallery.me.com/georgekawaguchi#100340>. Other videos can be viewed by clicking on the "My Gallery" button on the top left of the screen.

What a great celebration Vancouver has had in the last 2 months!

Go Canada Go!



President's Report AGM Feb 2010

During this past year your board of directors has been busy accomplishing many things for FITT members. We continue to review constitutional changes to better serve our members and keep pace with our new



Retiring Directors: Shirley Randell, Roy Nukina & Alex Danielisz with Ilario Galano & Tom Scott, Bryon Sinclair absent.

mission statement. We improved our communication to our members through a well received newsletter called the FITT Chronicle as well as our website, www.fittnow.com. Our collections for the Healthy Heart Program have improved tremendously along with record keeping. Organization of our fundraising events and social functions throughout the year was very successful. Both potlucks – Confederation and Bonsor – set record attendance this past year. We had a bowling night again after a one year hiatus and the attendance was great.

Committees were set up to deal with improving the Board's direction and strength. More members were involved this year through committees which gave us even better communication with our members. The "Exercise Prescription for a Healthy Lifestyle" booklet was published and distributed to all our members. This publication was

so well received that we are in the process of printing more copies for Burnaby Hospital's Healthy Heart Program to use and have available for doctors and other interested individuals.

Moving forward we will continue to tackle our constitutional changes and hope to complete the changes within the next 6 months for approval. The board has already approved pursuing

a change to our association to "give it charitable status". so that we can better serve our members. We are developing a questionnaire to see how helpful the exercise booklet has been for our members and obtain any other

information that members would like to see. The board will continue discussing direction of the association and input by all members is welcome. Please contact your class representatives to be heard on any issues you may wish to bring to the board's attention. We are looking towards increasing our classes this coming year and hope to add 2 exercise classes with representation on the board. In order to accommodate potential expansion of these classes the Board has approved and ratified at the AGM running with 14 directors for this coming year only to allow for representation from the expanded classes.

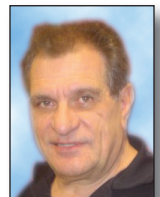
This year we have 4 retiring directors which have put many years on the board. We wish them well and appreciate their dedicated time on the board. **(Bryon Sinclair, Roy Nukina, Alex Danielisz and Shirley Randell)**

The board also approved lifetime memberships for our founding directors some time ago and they were officially presented at the AGM with their lifetime membership cards - **Maureen Baker, Don Cascon, Bill Conolly and Hank Mantel.**



Founding Directors: Don Cascon, Maureen Baker, Hank Mantel & Bill Conolly with Ilario Galano.

We welcome the new board of directors for 2010/2011. You will find the new board of directors in the FITT Chronicle and encourage each of you to contact them if you have any questions, suggestions or concerns.



Ilario Galano

F.I.T.T. CARDIAC ASSOCIATION BOARD OF DIRECTORS 2010 – 2011 YEAR

NAME	Position
Ilario Galano	President
Lloyd Rapchuk	Vice-President/Research and Development
John Titos	Treasurer
Wendy Hay	Secretary
John Crawford	Collections & Bonsor 2
Jim DarWood	at large
Bill Rettinger	Bonsor 1
Danica Seifert	Confederation 1
Sharon DiSanto	Confederation 2
Tom Scott	Thunderbird 1
John Petrie	Thunderbird 2
Lloyd Younker	Burnaby South
Peter Clark	Champlain Heights
Lorraine Brown	Past President
Pete Matino	Appointed Directors Staff/Liaison - Appointed

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Pension Income Credit

There is a federal non-refundable tax credit available on the first \$2000 of “qualified pension income” which, in some cases applies to RRSP and RRIF income.

Each province and territory has pension income credit, but the limit is \$1000 in all jurisdictions except 6 provinces.

The following types of income DO NOT qualify for the pension income credit:

- retiring allowances
- OAS/CPP/QPP receipts
- lump sum payments from a superannuation or pension plan
- lump sum settlements or partial withdrawals out of RRSP, DPSP or non-registered annuity
- death benefits paid by an employer to the beneficiaries of a deceased employee
- benefits paid from a Retirement Compensation Arrangement (RCA) or an unfunded SERP.

If you are between 65 and 70 years of age and have an RRSP but not receiving a benefit from a registered pension plan, then you should consider transferring an amount from the RRSP to a RRIF which would provide at least \$1000 of RRIF income. This would enable you to take advantage of the pension income credit.

Call to see if you qualify
Bill Rettinger
604-431-0117 x239



Exercise Therapy Week Building Strong Hearts

by Peter Matino

Exercise Therapists are probably one of the smallest recognized professional groups in Fraser Health with only eight permanent positions, but they are a small team with very big hearts.

Peter Matino, Exercise Specialist, has been with the Burnaby Healthy Heart program since 1998. The program, which operates at Burnaby, Peace Arch and Surrey, works with patients who have recently experienced a health crisis, to build healthy hearts and bodies through exercise therapy.

“The health confidence of these patients is down when they come to us,” said Peter. “They know they have to exercise but they don’t know how to get started.”

Peter and his colleagues provide guidance to help patients begin exercising safely, while increasing confidence in their physical abilities. Although “results may vary”, Peter says that generally there are huge gains after introducing safe, appropriate exercise. Patients who come into the program walking with a cane are soon getting on a bike and lifting weights.

Because exercise therapists are working with their clients regularly, they help monitor changes in their health status and are alert to anything that might be a

cause for concern. Regular exercise and monitoring can help decrease emergency room visits and readmission to hospital for some clients.

The Healthy Heart program has both an in-hospital program and a community program which operates at local exercise facilities such as community centres.

“My clients are like family,” Peter tells us. “I’ve worked with some patients for more than 10 years now.”

The program helps to create not only healthy bodies, but healthy minds as patients form strong social networks with each other during their recovery, bonding over common health stories.

Peter hopes that awareness of the Exercise Therapy profession can help carve a path for human kinetics and kinesiology students to find their way to a health care career. “This is an area poised for growth,” he says. “Exercise Therapy can help patients living with many types of chronic illness – not just cardiac patients.”

The exercise therapists of Fraser Health are part of a multi-disciplinary team consisting of Cardiologists/Internist, Nurses, Pharmacists and Dieticians.

Their qualifications include: Bachelors of Human kinetics/kinesiology and a post graduate certificate of Clinical

Exercise Specialist through The American College of Sports Medicine. Specializing in exercise prescription to effectively manage all chronic diseases, exercise therapists work primarily in outpatient Cardiac Rehabilitation programs within the clinical hospital setting as well as in a community setting.

Currently, these programs operate through Burnaby Hospital and at iConnect Centre at Peach Arch Hospital and work directly with patients who have recently had a cardiac event and/or surgery and patients with high risk factors. Patients are referred by a General Practitioner and/or Specialist.

Patients in the program exercise within a prescribed target heart rate range while their progression and changes in physical symptoms are monitored through telemetry, blood pressure measurements and perceived exertion.

What Do Exercise Therapists Do?

- Assist participants to achieve and/or maintain fitness and lifestyle goals
- Develop and implement exercise prescription
- Lead group exercise activities
- Monitor patients progression and changes in condition (i.e. case reviews, blood pressures, body composition)
- Lifestyle and fitness consultation





Emotional Pain Affects the Heart - How to protect our hearts during emotional pain.

Holly Kennedy-Symonds MHS
Prepared for AGM - Feb 17th



February is heart month, and we often think about love and hearts and all the wonderful emotions that brings - but what

about the impact to our hearts of emotional pain? Can people die of a broken heart? When we experience emotional pain, should we be looking at protecting our hearts as well as healing our “heart break”? Absolutely - let’s start with emotional pain - what is it?

Emotional pain can be described as heartache that results from a painful experience, such as the loss of a loved one or lost hopes and dreams such as illness or injury brings on. It can stem from depression, anxiety, disappointment, fear or guilt, and tends to worsen when you replay and relive painful, traumatic events that occurred in the past. Emotional pain can become crippling when it affects your mood, relationships, personal and professional life, and it occupies your mind constantly. Loss can be defined as an emotional response to what is or what I experience, when different from what I expected or wanted.

Many people experience emotional trauma during their childhood due to a variety of factors such as neglect, abuse, abandonment, or loss of parent. Emotional pain during adulthood may occur due to the end of a relationship, divorce, loss of a loved one, being a victim of crime, substance abuse, retrenchment or loss of employment. Often, where severe trauma is experienced, the

person may be continuously haunted by recurring nightmares and mental images, as in the case of a war veteran or a rape victim. Others who suffer from emotional pain may find themselves unable to stop dwelling on past hurts and disappointments, and may struggle to let go of the painful memories. They may find themselves in a cycle of guilt and punishment - reliving the event over and over again in their minds. As a result an individual may fall into depression. They may find themselves plagued with feelings of worthlessness or hopelessness. Some hide their pain or avoid facing their emotional trauma by resorting to self destructive behavior such as alcohol or drug abuse, aggression, repression or denial. Although it may seem like a coping mechanism, these actions are usually a cry for help – and not a proper way of coping.

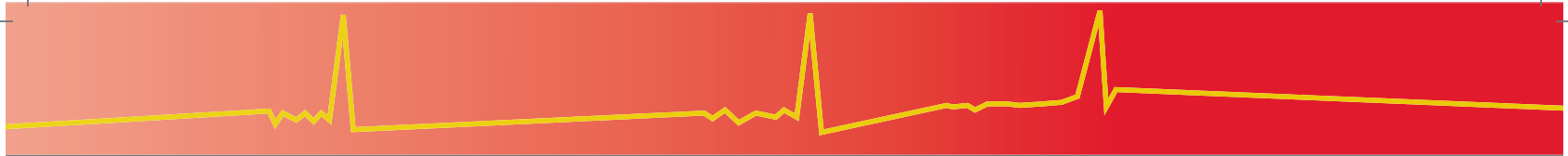
There is a fair amount of circumstantial evidence that chronic emotional stress can be associated with heart disease and early death. Several studies have documented that people without spouses die earlier than married people. Most authorities agree that having a spouse provides a significant degree of emotional support and stability. Other studies have shown fairly conclusively that people who have had recent major life changes (loss of a spouse or other close relative, loss of a job, moving to a new location) have a higher incidence of death.

People who are quick to anger or who display frequent hostility have an increased risk of heart disease.

Broken heart syndrome is commonly blamed for the death of a person whose spouse is already deceased, but the cause is not always so clear-

cut. The condition can be triggered by sudden emotional stress caused by a traumatic breakup, the death of a loved one, or even the shock of a surprise party. Broken Heart syndrome is clinically different from a heart attack because the patients have few risk factors for heart disease and were previously healthy prior to the heart muscles weakening. The recovery rates for those suffering from “broken heart syndrome” are faster than those who had heart attacks and complete recovery to the heart was achieved within two weeks. Broken Heart Syndrome has another name: Takotsubo cardiomyopathy, or transient apical ballooning syndrome, apical ballooning cardiomyopathy, stress-induced cardiomyopathy, and simply stress cardiomyopathy. It is a type of non-ischemic cardiomyopathy in which there is a sudden temporary weakening of the myocardium (the muscle of the heart). This weakening can be triggered by emotional stress, such as the death of a loved one, so the condition is also known as broken heart syndrome.

The typical presentation of someone with takotsubo cardiomyopathy is a sudden onset of congestive heart failure or chest pain associated with cardiogram changes suggestive of an anterior wall myocardial infarction (heart attack). During the course of evaluation of the patient, a bulging out of the left ventricular apex with a hypercontractile base of the left ventricle is often noted. It is the hallmark bulging out of the apex of the heart with preserved function of the base that earned the syndrome its name “tako tsubo”, or octopus trap in Japan, where it was first described. The cause appears to involve high circulating



levels of catecholamines (mainly adrenaline/epinephrine). Evaluation of individuals with takotsubo cardiomyopathy, typically include a coronary angiogram, which will not reveal any significant blockages that would cause the left ventricular dysfunction. Provided that the individual survives their initial presentation, the left ventricular function improves within 2 months. Takotsubo cardiomyopathy is more commonly seen in post-menopausal women. Often there is a history of a recent severe emotional or physical stress.

Cause is unknown, but likely there are multiple factors at play which include some amount of vasospasm, failure of the microvasculature, and an abnormal response to catecholamines (such as epinephrine and norepinephrine), released in response to stress. The treatment of takotsubo cardiomyopathy is generally supportive in nature. In individuals with low blood pressure, support with inotropic agents or an intra-aortic balloon pump have been used. In many individuals, left ventricular function normalizes within 2 months. Aspirin and other heart drugs also appear to help in the treatment of this disease, even in extreme cases.

Despite the grave initial presentation in some of the patients, most of the patients survive the initial acute event, with a very low rate of in-hospital mortality or complications. Patients are expected to make a favorable recovery once past the acute stage of the syndrome, and the long-term prognosis is excellent. Even when ventricular systolic function is heavily compromised at presentation, it typically improves within the first few days and

normalises within the first few months

Not all emotional stress is bad. A sense of loss of control appears to be a particularly important form of emotional stress. Furthermore, this evidence seems to confirm that if some sense of control over one's destiny is maintained, stress can be exhilarating rather than debilitating.

Stress management programs often consist of breathing exercises, stretching exercises, Yoga, meditation, and/or massage. There are probably several useful approaches, but they all aim toward the same goal – to blunt the adrenaline response to minor stress. Essentially, new responses need to be learned, so that the fight-or-flight adrenaline surge is not automatically engaged at the first sign of trouble. Stress management programs have begun to demonstrate some success in accomplishing this end.

A recent study from Duke University reported a significant reduction in heart attacks among patients with coronary artery disease who underwent a formal stress management program, which was used in conjunction with a smoking cessation program, a weight-loss program, and control of lipids. And finally, it should be pointed out that exercise is a great way of reducing chronic stress, and in addition has the advantage of directly lessening the risk of coronary artery disease, and helping to control obesity.

There are effective ways of coping through emotional pain and letting go of the traumas of the past. Dealing directly with your emotions and acknowledging emotional trauma is the first step to healing. Treatments that aim to help you

claim your life back and put things into perspective include: counseling and psychotherapy, cognitive behavioral therapy, meditation and spiritual therapy. What is broken? - my heart not my head. Use your knowledge to take the time to understand your responses to loss, patterns of comfort that are helpful from those that are not and L.I.V.E. to heal from emotional pain:

- L - listen
- I - identify
- V - validate
- E - evaluate

If you do not take responsibility for healing from emotional pain, you will always live as a victim of circumstances and continue to hurt. Victims have no personal power. When you feel, identify, and process, you can choose to act on truth and heal. Then you can experience the present moment, abundant life and living.

Emotional pain can get us rehashing moments and reliving experiences, so they become part of our present, even though they occurred in the past. If we allow this, our past can drive our future. We can even be distracted by these thoughts, so we miss out on the present and negatively affect our future. Work through the past, but be fully present in the now, with your family, friends and co-workers and create your new future. Be the author of your destiny.

Holly Kennedy-Symonds works as a Clinical Nurse Specialist for the Fraser Health Regional Cardiac Services Program.



Healthy Heart Bowling Night

The evening started off at 5pm with 45 of our group meeting for a lovely dinner at Earl's Restaurant on Kingsway. Food was good!

Then on to Old Orchard Bowling Lanes where the rest of our group were meeting - over 60 people in all participated. We played 2 regular games of 5 pin bowling - then 1 crazy game which cracked us all up!!

There were lots of snacks, juice, coffee and pop.

A number of prizes were given out. Worthy of mention, **Wayne Randell** won men's high score and **Pat Titos** won women's high score - Pat only bowled 317....what a game !!

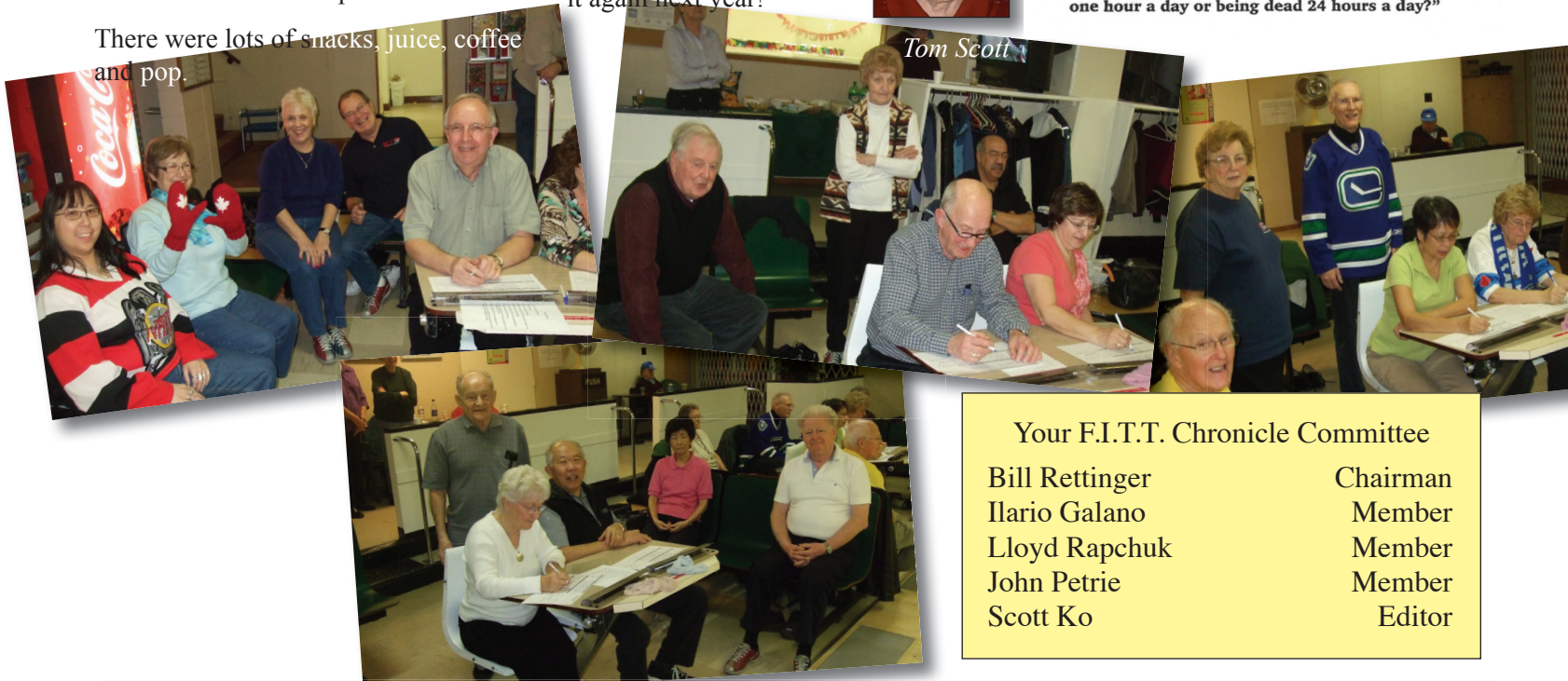
Lloyd Rapchuk won the prize for best costume. We also had a 50/50 draw with 2 winners, each receiving \$50.00. Everyone had a great time and we will do it again next year!



Tom Scott



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 "What fits your busy schedule better, exercising one hour a day or being dead 24 hours a day?"



Your F.I.T.T. Chronicle Committee

Bill Rettinger	Chairman
Ilario Galano	Member
Lloyd Rapchuk	Member
John Petrie	Member
Scott Ko	Editor

F.I.T.T. Calendar of Events 2010			Month	Event	Location
Month	Event	Location			
March	New Board	Bonsor	June 5	Hats Off Day	Hastings Street
	FITT Chronicle	All locations	June 6	Rhythm of Life Run	Burnaby Lake Park
April	TBD		July	Discovery Days	Burnaby
June	FITT Chronicle	All locations	August	TBD	

Hedging / Pruning / Shaping

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