FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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| OMB APPROVAL | | | | | | | | | | |
|--------------|-----------|--|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | | |
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hours per response: 0.5

| Check this box if no longer subject to |
|--|
| Section 16. Form 4 or Form 5 |
| obligations may continue. See |
| Instruction 1(b). |

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading Symbol

VALIDES OPTS INC. [MITN.]

| 1. Name and Address of Reporting Person* HERNANDEZ ROLAND A | | | | | | 2. Issuer Name and Ticker or Trading Symbol VAIL RESORTS INC [MTN] | | | | | | | | | of Reporting cable) or | g Pers | 10% O | wner |
|--|---|--|---|----------------|----------------------------|--|---|--------------|--|------------|----------------|--|---|---|---|---|--|--|
| C/O VAIL RESORTS, INC. | | | | | Date of /20/20 | | t Tran | saction (Mor | nth/Da | ay/Year) | | Office below | (give title | | Other (below) | specify | | |
| P.O. BOX 7 | | | | | 4. If | f Amen | dment, | Date | of Original F | iled (1 | Month/Da | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| (Street) VAIL CO 81658 | | | | | | | | | | | | | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | | |
| | | Tab | le I - Non | -Deriva | ative | Sec | uritie | s Ac | quired, D | ispo | osed c | of, or Be | neficia | lly Owne | t | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | Execution Date | | | Code (Instr. 5) | | | | | Benefic Owned | es For ially (D) Following (I) (| | : Direct r Indirect | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | Code | / | Amount | (A) o (D) | Price | Reporte Transac (Instr. 3 | ction(s) | | | (Instr. 4) | |
| | | Т | able II - D | | | | | | uired, Dis s, options | | | | | y Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution D if any (Month/Day | Date, T | ransaction Code (Instr. | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title an Amount o Securities Underlyin Derivative (Instr. 3 an | f g Security | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | i ly i | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisable | Exp Dat | piration te | Title | Amount or Number of Shares | | | | | |
| Option to Purchase | \$14.73 | 11/20/2003 | | | A | | 5,000 | | 11/20/2004 | 11/2 | /20/2013 | Common Stock | 5,000 | \$0 | 10,000 |) | D | |

Explanation of Responses:

/s/ Roland A. Hernandez

11/24/2003

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.

^{*} If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

^{**} Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).