



Join Us for the 4th Annual GVSU Moriah Muscaro Feature Twirler Endowed Scholarship Clinic

Saturday, January 5, 2019

9:15-9:30 a.m. Check-In; 9:30 a.m.-12:45 p.m. Clinic

Jewish Community Center

Main Basketball Court

6600 W. Maple Road

West Bloomfield, Michigan 48322

(Please enter MAIN entrance to the JCC)

Carolyn Gregory and Victoria Dierks, GVSU Features and recipients of the Moriah Muscaro '15 Feature Twirler Endowed Scholarship in 2016 and 2017, respectively.

In April of 2015, Moriah & GVSU started a scholarship to attract top level twirling to the Laker Marching Band. The scholarship is known as the Moriah Muscaro '15 Feature Twirler Endowed Scholarship. This clinic is designed to provide 100% of profits to this endowed scholarship.

**Learn new tricks, work on bodywork, PFP routines, and take optional mini-privates with Top Instructors. All levels of twirlers are welcomed.*

** Raffle drawings with fun, special prizes from GVSU!*

** Cost is \$47*

** Get a registration brochure at the Michigan States Contest or go to www.TwirlM.com.*

** Deadline to register is 12/15/18.*

** Questions? Call 248-425-3733 or email TwirlMBaton@gmail.com*

Instructor lineup includes the following who are ALL donating their time:

- Moriah Muscaro Forster, Former College Miss Maj of America, Collegiate Halftime Champ, & World Team Member
- Victoria Dierks, GVSU Feature Twirler & 2018 College Miss Majorette of the Great Lakes
- Tiffany Reicosky Miller, Former College Miss Majorette of America, 3X NBTA & USTA World Team Member
- Taylor Scheffer, Michigan State University Feature Twirler & former Michigan Pageant Royalty
- Claire Wielichowski, Western Michigan University Feature Twirler & 15-year member of Limited Edition
- Brianna Bolinger, Western Michigan University Feature Twirler, 4X USTA Strut and Artistic Pairs Champion
- Troy Kraly, Western Michigan University Feature Twirler, 3X NBTA World Team Member
- Adrian Mckinney, Former member of Perrysburg Sophisticates & former UK Feature Twirler & Majorette
- Dr. Michelle Brewer, Top national judge & former feature twirler for University of Illinois
- Jaymee Beard, Assistant Director of very successful, long-time Michigan Twirling Group – Twirl Michigan
- Samantha Merritt, Siena Heights University Feature Twirler and long-time member of Twirl Michigan
- Serena Solis, Bowling Green State University Twirler & member of the Twirl-M's
- Dori Ranck, Dance instructor for The Pointe Academy of Dance and The Twirl-M's
- Rachel Stokes, Assistant Director of the 15-time national champion Twirl-M's
- Holly Minoletti, Assistant Director of the 15-time national champion Twirl-M's
- Alissa Yenglin, Instructor of the 15-time national champion Twirl-M's
- Rhonda Muscaro, Director of the 15-time national champion Twirl-M's, judge & coach

REGISTRATION FORM

Please complete this form, the attached waiver form, and make checks payable to Moriah Muscaro – note GVSU Feature Twirler Scholarship Clinic in the memo line.

NOTE: checks need to be made to Moriah Muscaro so that all the money can be lumped together and a check written to GVSU from Moriah, an Alumni, and receive any matching funds!

Twirler Name: _____

Twirling Level: Recreation Novice Beginner Intermediate Advanced

Instructor's Name: _____

Parent Name: _____ Email: _____

Your Phone Number: _____

Your Address: _____

Clinic Fee: \$47, check payable to Moriah Muscaro

Must include the attached waiver form.

**Please mail this form, with \$47 check, and the waiver form to:
Moriah Muscaro
GVSU Scholarship Clinic
261 Woodcreek Court
Commerce Township, Michigan 48390**

***Registration Deadline is postmarked by 12/15/18. Late registrations accepted via phone through 12/29/18 to 248-425-3733. Add \$5 for late registrations which need to be paid at the door, cash only.**

(Optional 10 Minute Mini Privates are available for \$10 each. Email TwirlMBaton@gmail.com with your requested Mini Privates. A confirmation will be sent by 1/2/19 and you can pay cash for those assigned to you at the door.)

Parents may stay to watch at the clinic. Bleacher seats are available.

(TURN OVER)



Minor Guest Permission and Liability Agreement

I _____ hereby request that the Jewish Community Center (JCC) of Metropolitan Detroit admit onto its premises, under the supervision of JCC member _____ each of the following minor children ("children") of the undersigned parent or legal guardian.

CHILD'S FULL NAME _____ DOB _____
PARENT/GUARDIAN PHONE _____

CHILD'S FULL NAME _____ DOB _____
PARENT/GUARDIAN PHONE _____

I understand and agree that there are risks of significant injury to children, whether caused by the children or someone else, in their use of or presence on JCC premises. I understand and agree that these risks of injury include, but are not limited to, slips, trips, falls, collisions, thefts, equipment failure, or other such accidents or incidents that may result in injury, harm or damage, including but not limited to economic, property, emotional, mental, physical or any other type of damage, including but not limited to sprains, torn muscles or ligaments, broken bones, strokes, heart stress, heart attacks, paralysis, disfigurement, death, or other forms of pain or suffering. On my own behalf, and on behalf of each of the minor children above, I fully understand, voluntarily accept, and specifically assume the series risks of injury to the children.

On my own behalf, and on behalf of each of the minor children listed above, I agree to release and discharge from all liability, and waive all claims, demands and actions against, the Jewish Community Center of Metropolitan Detroit, its instructors, employees, associates, affiliates, agents, vendors and volunteers for any and all injuries, harms, or damages sustained by any of the children in connection with their use or presence on the premises, or their use of facilities, equipment, services, programs or activities within or outside the JCC, resulting or arising from the negligent acts or omissions of the Jewish Community Center, or the negligent acts or omissions of me, any of the children, other members, guests, visitors or other persons on the premises. I agree to defend, indemnify and hold the Jewish Community Center of Metropolitan Detroit harmless against any and all claims brought by anyone against the Jewish Community Center related to such injuries, harms or damages. I furthermore give my consent and authorize the Jewish Community Center of Metropolitan Detroit and/or the sponsoring member to seek medical attention and treatment for my child in the event of injury.

By signing this agreement/waiver, I certify that I have thoroughly read, fully understand and voluntarily accept and agree to its terms.

Print Name of Parent or Guardian.

Parent or Guardian Signature and Date

Print Name of JCC Member and Member Number

Member Signature and Date

JCC Staff Member and Date