



# Twirl-M's Fall Classes



Join the 14-time national champion Twirl-M's for its 19th season of twirling in the Lakes Area. Whether you are brand new with no twirling experience, or a seasoned competitive twirler, the Twirl-M's has just the program for you!

Director: Rhonda Muscaro. Learn more at [www.TwirlM.com](http://www.TwirlM.com).

Weekly baton classes that feature recreational twirling through competitive training. All students will perform in the groups 19<sup>th</sup> Annual Recital. Select the class that meets your twirling abilities. EXTRA CLASS FEES APPLY: Fees include \$39 material supply fee per family due first day of class; \$27 charge for a baton for those who do not have one; \$99 for group's costume if you choose to be in the recital. The fees are payable to Rhonda Muscaro. Recital participation fee is \$20 per family payable to Walled Lake Schools on or before 10/22/18 and includes recital admission.

## Monday Night Baton

<b>Class #: F18901</b> Instructor: Twirl M's Mondays, 9/24-11/30 Fee: \$154	New Twirlers Location: Banks 6:00-6:30 PM	<b>Class #: F18904</b> Instructor: Twirl M's Mondays, 9/24-11/30 Fee: \$179	Mini-Team – Instructor Invite Location: Banks 6:00-7:00 PM
<b>Class #: F18902</b> Instructor: Twirl M's Mondays, 9/24-11/30 Fee: \$164	Novice – Basic Baton Knowledge Location: Banks 7:00-7:45 PM	<b>Class #: F18905</b> Instructor: Twirl M's Mondays, 9/24-11/30 Fee: \$189	Junior Team – Instructor Invite Location: Banks 7:00-8:30 PM
<b>Class #: F18903</b> Instructor: Twirl M's Mondays, 9/24-11/30 Fee: \$164	Pre-Minnies – Instructor Invite Location: Banks 6:15-7:00 PM	<b>Class #: F18906</b> Instructor: Twirl M's Mondays, 9/24-11/30 Fee: \$189	Team – Instructor Invite Location: Banks 7:30-8:30 PM

## Specialty Baton Classes

\*All specialty class participants will participate in the recital with a special class routine. Ballet skirts provided.

<b>Class #: F18908</b> Instructor: Twirl M's – Miss Dori Mondays, 9/24-10/29 Fee: \$74*	Rec New & Novice Ballet Location: Banks 6:30-7:00 PM	<b>Class #: F18910</b> Instructor: Twirl M's – Miss Dori Mondays, 9/24-10/29 Fee: \$74*	Junior Team & Team Ballet Location: Banks 6:00-6:30 PM
<b>Class #: F18909</b> Instructor: Twirl M's – Miss Dori Mondays, 9/24-10/29 Fee: \$74*	Pre-Minnies & Mini-Team Ballet Location: Banks 7:00-7:30 PM	<b>Class #: F18911</b> Instructor: Twirl M's Mondays, 9/24-10/29 Fee: \$79	State Prep for Junior Team Location: Banks 6:30-7:00 PM

<b>Class #: F18912</b> Instructor: Twirl M's Mondays, 9/24-10/29 Fee: \$79	State Prep for Team Location: Banks 7:00-7:30 PM
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To register: REGISTER ONLINE at <http://wlcsc.org/our-district/community-education-programs/>. You may return the attached registration form and payment to Walled Lake Community Education, 850 Ladd Road, Building D, Walled Lake, MI, 48390. Make all checks payable to Walled Lake Schools. Questions? Call (248) 956-5000. Photographs may be taken, please refer to the website or call for more information. Registration deadline is 7 days prior to class beginning. Visit us on the web at <http://wlcsc.org/our-district/community-education-programs/> to view policies and class information.

CLASS # \_\_\_\_\_ Twirl-M's Monday Fall 2018 Fee: \$ \_\_\_\_\_

Name: \_\_\_\_\_ Grade \_\_\_\_\_ DOB \_\_\_\_\_

Address: \_\_\_\_\_  
No. Street City Zip

Parent Name: \_\_\_\_\_ Email: \_\_\_\_\_

Phone #: \_\_\_\_\_ Work/Emergency # \_\_\_\_\_

Visa/MC # \_\_\_\_\_ Exp Date: \_\_\_\_\_

### Emergency & Medical Information:

Any medical, psychological or other problems? \_\_\_\_\_

Name of emergency contact (not parents) \_\_\_\_\_ (hm) \_\_\_\_\_ (wk) \_\_\_\_\_

Family Doctor \_\_\_\_\_ Phone \_\_\_\_\_

Hospital preferred for emergency treatment \_\_\_\_\_

**Authorization to dispense medication must be on file with WLCE one week prior to camp beginning.**

### Release and Hold Harmless Authorization

I authorize Walled Lake Community Education to secure emergency medical and/or surgical treatment for \_\_\_\_\_ WHILE IN THEIR CARE. Non-emergency medical treatment or elective surgery is not in this authorization.

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_