

2009 U.S.T.A. ILLINOIS STATE BATON CHAMPIONSHIPS

Date: Saturday March 21st, 2009

Location: Hille Middle School, 5800 151st street, Oak Forest, IL. 60452

Directions: I-294, exit Cicero Av./127th, (stay to left at fork), right onto Cicero, take Cicero to 147th street, right on 147th to Central, left on Central, to 151st, right on 151st.

Doors Open: 8:00 a.m. Contest Starts: 9:00 a.m.

Sponsored by: Twirling Bears Baton Corp and Riverside Twirling Stars Baton Teams

Contest Directors: Elaine Jones and Lisa Shaw

Spectator Admission: Adults - \$5.00, Children under 12 \$2.00, under 3 free

STATE GROUPS: Twirling Teams, Dance Twirl Teams, Parade Corps, Show Corps, Pairs (all classifications including pair dance twirl)

OPEN GROUPS: Twirling Teams, Dance Twirl Teams, *Trios, *Color Guard/Flags, *Pom-Pon Teams, *Dance Teams, *Cheerleading Teams, Parade Corps, Show Corps, Pairs (all classifications) , half time teams*

STATE SOLO EVENTS: solo, 2 baton, 3 baton, dance twirl, strut, rifle solo, color guard/flag solo

OPEN SOLO EVENTS: solo, *pre-solo (never won a 1st), 2 baton, 3 baton, dance twirl, strut, rifle solo, colorguard/ flag solo, *pom-pon solo, basic strut, *basic strut evaluation (never won a 1st, all awards), military "L", presentation, competitive achievement system including compulsories, movement technique, freestyle, dance solo* , saber solo* , modeling* (see separate entry form)

All U.S.T.A. rules apply. Awards 1st – 3rd for all events. Concession stand available. No outside food or beverage allowed in the building. **No refunds given.** State combined age preliminaries: 0-8, 9-12, 13-16, 17-20, 21+

Contest directors, Twirling Bears, Riverside Twirling Stars, buildings, school district 142 not responsible for accidents, injuries or lost items. Small divisions will be combined, larger divisions will have extra awards added at contest director(s) discretion. *Denotes unsanctioned events. **Pom and dance solos will be done to the U.S.T.A. 1 ½ minute solo record**

Note: Must be a resident of Illinois to compete for a state group or state solo title. **Open events are open to all.** For state group events, at least one member of the group must reside in Illinois.

NO PERSONAL CHECKS ACCEPTED.

(Must include copy of U.S.T.A. membership card with entry or include membership payment with entry) **Member for a day is \$6.00– fill out form.**

All U.S.T.A. rules apply. U.S.T.A. judges will be used for all sanctioned events.

Please send entries with payment to: Elaine Jones 2282 W. Nichols #B Arlington Heights, IL. 60004 (847) 342-1971. Make certified checks payable to: Twirling Bears Baton Corp.

NAME _____ AGE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____ PHONE _____

BIRTHDAY _____ MALE _____ FEMALE _____

COACH(ES) for the past 6 months _____

DUET/TRIO PARTNER'S NAME and AGE _____

Circle events entered: **Fees: Teams/Corps: \$4.00 per member, Open solos - \$7.00 per event, State solos - \$13.00 per event**

Note: Please do not write in or add additional events/divisions on the form below

STATE:

Twirl Team ____ Beg. ____ Int. ____ Adv. ____ Small (4-8 mem.) ____ Large (9+ mem.)

Dance Twirl Team ____ Beg. ____ Int. ____ Adv. ____ Small (4-8 mem.) ____ Large (9+ mem.)

Parade Corp ____ Novice ____ A Class ____ Open Class

Show Corp ____ Novice ____ A Class ____ Open Class

Regular Pairs (Av.Age) _____ Pair Dance Twirl (Av. Age) _____

List names/ages of team members on back or separate sheet of paper

Rifle Solo

Colorguard/Flag solo _____ (note: U.S.T.A. solo categories for State are all one category, not beg., int, adv, etc.)

Solo

Dance Twirl Solo 2-baton 3-baton

U.S.T.A. Strut

OPEN:

Twirl Team ____ Beg. ____ Int. ____ Adv. ____ Small (4-8 mem.) ____ Large (9+ mem.)

Dance Twirl Team ____ Beg. ____ Int. ____ Adv. ____ Small (4-8 mem.) ____ Large (9+ mem.)

Parade Corp ____ A Class ____ Open Class

Show Corp ____ A Class ____ Open Class

*Trio Average Age _____

*Pom-Pon Team _____

*Color Guard/Flag Team ____ Half Time Team _____

*Dance team ____ Tap ____ Jazz ____ Ballet ____ Other

Competitive Achievement List Event/Class: _____

*Cheer Team _____

Pairs (Av.Age) _____ Beg. ____ Adv. ____

Rifle Solo _____ Pair Dance Twirl _____ (Av Ag) _____

Colorguard/Flag solo _____ *Sabre solo _____

Solo ____ Novice ____ Beg. ____ Int. ____ Adv. ____ pre-solo (never won a 1st)

Dance Twirl Solo ____ Beg. ____ Int. ____ Adv. ____

2-baton ____ Beg. ____ Int. ____ Adv. ____

3-baton ____ Beg. ____ Adv. ____

U.S.T.A. Strut ____ Beg. ____ Int. ____ Adv. ____

Basic Strut ____ Beg. ____ Int. ____ Adv. (march in a square) Basic Strut _Eval. _____

Military "L" Strut ____ Beg. ____ Int. ____ Adv. Presentation ____ Beg. ____ Int. ____ Adv. ____

*Pom-pon solo _____ *Dance solo _____

(enclose copy of U.S.T.A. card, member. fee or add \$6.00 member for a day)

TOTAL ENCLOSED: _____ + \$6.00 membership if not a member = \$ _____

List names and ages of teams on back or separate sheet of paper.

ENTRY DEADLINE: POSTMARKED BY February 28th, 2009 Late: March 1st – March 5th add \$1.00 per event . NO PERSONAL CHECKS ACCEPTED

THE UNITED STATES TWIRLING ASSOCIATION

PRESENTS THE

2009 ILLINOIS STATE BATON TWIRLING CHAMPIONSHIPS

SATURDAY MARCH 21st, 2009

HILLE MIDDLE SCHOOL, OAK FOREST, IL.

Support your cheerleaders, colorquad, pom-pon girls and baton twirlers by taking out an ad in the State Booklet for this event!!

All advertisers will be mailed a copy of the book

Good luck one-liner: \$5.00

¼ page add: \$15.00

½ page add: \$25.00

Full page add: \$45.00

Submit all pictures, art-work, camera ready to be photocopied. We can also print your business card as a part of your add.

Name of Business: _____

Manager's/Director's, etc. Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ (*Show add below as it should appear*)

Use the back of this sheet for additional space, or send us your own copy.

Circle: one-liner ¼ page add ½ page add full page add

Amount enclosed with add: _____ (Adds will not be printed unless full payment is enclosed with order). Attach pictures, business cards, etc.

Mail to: **Elaine Jones** 2282 W. Nichols #B Arlington Heights, IL. 60004 (847) 342-1971

Adds must be post marked by February 28th, 2009 to be included in the state booklet.

All Memberships include Accident insurance - Now \$10,000 of medical & dental coverage

This form replaces ALL Previous membership forms. Please complete the information below and return this application with the correct payment for the type of membership you choose to have. You may charge your membership to your Credit Card. *All memberships expire August 31.*

Student's Name: _____		Gender
Parent/Guardian Name (If athlete is under 18): _____		<input type="checkbox"/> Male <input type="checkbox"/> Female
Address _____		Athlete's Primary Coach _____
City _____	State _____	Zip _____
Phone _____	USTA ID: _____	Birth date _____
Member Email: _____	Parent/Guardian Email: _____	Renewal <input type="checkbox"/> Yes <input type="checkbox"/> No
Tender <input type="checkbox"/> Check <input type="checkbox"/> Credit Card	Card No _____	Expiration _____ / _____
TYPE: MC VISA Am. Ex. Discover	Name on Card _____	Signature _____

FILING INSTRUCTIONS: Find The Membership Type You Desire To Purchase. Find The Column That Contains The Date Of Your Filing. Check The Box Where Those Two Choices Meet. Pay That Fee. All memberships expire on Aug 31 st no matter when you apply. USTA recommends that all members renew by Sept 1 st each year to not only pay the lowest price but to receive all mailings.		7/15/08 to 11/01/08	11/02/08 to 12/01/08	12/02/08 to 7/14/09
FIRST YEAR INDIVIDUAL <ul style="list-style-type: none"> • Proof of membership letter • National Entry Flyer, Spring Issue of "Catch It" 	You may ONLY apply for this membership type ONCE!	<input type="checkbox"/> \$ 15.00	<input type="checkbox"/> \$ 15.00	<input type="checkbox"/> \$ 15.00
FULL <ul style="list-style-type: none"> • Same benefits as First Year Individual • Uniform insignia (New members) Catch-It subscription 		<input type="checkbox"/> \$ 33.00	<input type="checkbox"/> \$ 43.00	<input type="checkbox"/> \$ 53.00
ELITE (Required for all participants in the Trials and Pre-Trials) <ul style="list-style-type: none"> • Same benefits as Full • Password Protected access to the Elite Section of the U.S. Twirling Website for Rule Clarifications, Updates, Trials & Pre-Trials Handbooks and Entries 		<input type="checkbox"/> \$ 53.00	<input type="checkbox"/> \$ 63.00	<input type="checkbox"/> \$ 73.00
PROFESSIONAL-Registered or Certified-check appropriate box <ul style="list-style-type: none"> • Same benefits as Full • Coach's patch- new certified members • Certificate (for first time Certified Members only) • Access to professional's area of the website • \$2 million Liability Insurance coverage (certified members only) • Minimum Age: 16 • Minimum Age to vote: 18 	<input type="checkbox"/> Registered Coach No Insurance Coverage	<input type="checkbox"/> \$ 75.00	<input type="checkbox"/> \$ 85.00	<input type="checkbox"/> \$ 95.00
	<input type="checkbox"/> Certified Coach or Judge Insurance Coverage Provided	<input type="checkbox"/> \$ 75.00	<input type="checkbox"/> \$ 85.00	<input type="checkbox"/> \$ 95.00
Member for a Day only – for one contest Check _____		\$5.00	\$5.00	\$5.00
Enclose \$6.00 _____				
FAMILY MEMBER (First family member must hold a current Full, Elite or some form of Professional membership) <ul style="list-style-type: none"> • Same insurance coverage as Full member • Membership letter 	Each Member Must Fill Out Their Own Form	<input type="checkbox"/> \$ 18.00	<input type="checkbox"/> \$ 23.00	<input type="checkbox"/> \$ 28.00
TEAM (Only one unchanging team and/or 15 or fewer athletes) <ul style="list-style-type: none"> • Catch-It subscription mailed to address above • Member letter for the Team • Accident insurance on each athlete listed on roster 	Group Fee +	<input type="checkbox"/> \$ 60.00	<input type="checkbox"/> \$ 60.00	<input type="checkbox"/> \$ 70.00
	# of Athletes _____ X	<input type="checkbox"/> \$ 3.00	<input type="checkbox"/> \$ 3.00	<input type="checkbox"/> \$ 4.00
ORGANIZATIONAL (More than one team and/or 16 or more athletes) <ul style="list-style-type: none"> • Catch-It subscription mailed to address above • Member letter for the Organization • Accident insurance on each athlete listed on roster 	Group Fee +	<input type="checkbox"/> \$ 160.00	<input type="checkbox"/> \$ 160.00	<input type="checkbox"/> \$ 170.00
	# of Athletes _____ X	<input type="checkbox"/> \$ 3.00	<input type="checkbox"/> \$ 3.00	<input type="checkbox"/> \$ 4.00
Alumni Association This member type includes proof of membership letter, e-newsletter (if e-mail address is provided) and the fall (winners) issue of "catch it" This member type does NOT include the privilege of entering competitions, insurance coverage or voting privileges.	This member type is for retired coaches & judges, former athletes and their parents/other relatives or anyone interested in supporting twirling.	<input type="checkbox"/> \$ 15.00	<input type="checkbox"/> \$ 15.00	<input type="checkbox"/> \$ 15.00

WAIVER/INDEMNITY OF LIABILITY: I agree to assume the risk of any injury that may happen to me (or my child) as a result of participation in a USTA sanctioned event. I further agree to indemnify and hold the United States Twirling Association, its agents or employees harmless from any loss they may sustain as a result of injury to me (or my child) as a result of my participation in USTA events. I have read the "Parents/Legal Guardians Responsibilities" in the current edition of the USTA Information, Procedures and Rules Book. As a condition for the USTA's acceptance of my child's (or my) entry in a USTA event, I agree to abide by and perform each of the duties that are set forth in that statement.

Signed _____	Date _____
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