



**Make checks payable to Diane Sorvillo and mail to:**  
**Diane Sorvillo**  
**PO Box 549**  
**Odessa, Fl 33556**                      **email csorvill@tampabay.rr.com**  
**For more information call Diane at (352) 212-6077**

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**NAME:**

\_\_\_\_\_

**ADDRESS:**

\_\_\_\_\_

**CITY & STATE:** \_\_\_\_\_

**ZIP:** \_\_\_\_\_

**TELEPHONE:** \_\_\_\_\_

**TEACHER:** \_\_\_\_\_

**I HAVE INCLUDED MY CHECK \$45.00** \_\_\_\_\_ **SISTER RATE \$75.00** \_\_\_\_\_

**WILL PAY CASH AT THE DOOR \$55.00** \_\_\_\_\_ **SISTER RATE \$95.00 (2)** \_\_\_\_\_  
**third child or more \$15.00** \_\_\_\_\_ **each**

**You may pay at the clinic with a credit card. Processing fee is \$7.00**

**LEVEL:**

**Special Beginner** \_\_\_\_\_ **Beginner** \_\_\_\_\_ **Intermediate** \_\_\_\_\_

**Advanced/Elite** \_\_\_\_\_ **Feature Twirler** \_\_\_\_\_ **Other** \_\_\_\_\_

**AWARDS TO THE HARDEST WORKING TWIRLERS IN EACH LEVEL.**

**SPECIAL BONUS: 1<sup>ST</sup> ENTRY RECEIVED & PAID FOR WILL RECEIVE A  
\$10.00 CONTEST CREDIT!!!!**