

The Wisconsin Dance Council

invites you to the Awards Ceremony and 50th Anniversary Celebration *Honoring*

Simone Linhares Ferro – Career Recognition Jennifer Janus Hiltbrand – Distinction Tori Rogoski-Rutta – Margaret H'Doubler Tania Tandias – Choreography/Performance

Sunday, July 10, 2016

Middleton High School, Performing Arts Center 2100 Bristol St., Middleton, WI 53562

Master Class registration – 9:00 am Reception with Hors d'oeuvres – 5:00 pm Awards Ceremony and Celebration – 6:00 pm

RSVP by June 30

Please make checks payable to the Wisconsin Dance Council
Mail to:

Wisconsin Dance Council Attn: Jean Elvekrog, WDC Treasurer P.O. Box 707 Madison, WI 53701-0707

Or register online: wisconsindancecouncil.org/wdc50

Special thanks to Major Sponsors:

University of Wisconsin–Madison School of Education Phyllis Sanfillipo Advance Registration is required to participate in master classes.

Master Classes

9:15 am to 10:30 am

Graham Technique with Lisa Thurrell

10:45 am to 12:00 noon

Contemporary Technique with Chelsey Dahm Bradley

12:15 pm to 1:30 pm

West African/Afro-Caribbean Technique with DeMar Walker

All classes are for beginning through intermediate dancers age 12-adult.

The master class fee covers all three classes.

Please return this lower portion with your payment on or before June 30. Please make checks payable to Wisconsin Dance Council.

	Adults
Name	Ceremony only \$45
	(or add \$5 for WDC's 50 th anniversary)
Address	
	Ceremony and Master Classes \$60
City/State/Zip	
	Master Class only \$25
Phone Number	
	Students under 23 years of age
EMail	Ceremony and Master Classes \$35
Names of Guests	
Attending Ceremony	Master Classes only \$20
	Please consider making a donation to
Names of Guests	the Scholarship Fund in honor of one
Attending Master Classes	of WDC's current or past Awardees
	TOTAL AMOUNT ENCLOSED
	TOTAL AMOUNT ENCLOSED

The Wisconsin Dance Council Master Classes – July 10, 2016

Check In and Registration 9:00am

Middleton High School, Performing Arts Center, 2100 Bristol St, Middleton, WI 53562

Graham Technique with Lisa Thurrell – 9:15am to 10:30am

Lisa Thurrell is Artistic Director, Choreographer, faculty, and dancer, at Kanopy Dance Company. Ms. Thurrell has an MFA in Dance/Minor in Asian Theatre from the University of Wisconsin-Madison. She has a Professional Trainee and Teaching Program Certificate, from the Martha Graham School for Contemporary Dance, NYC and danced with the Martha Graham Company in NYC ('91-'94). She's been honored with awards from: WAB, CitiARTS MCCF, DCCAC, Pleasant T Rowland, Overture, MCF; nominated for the Bonnie Bird International Choreography Award (Laban Center London '97).



Class Summary: Graham Technique is based on the foundation of contraction and release, shift of weight, spiral, and opposition.

Contemporary Technique with Chelsey Bradley – 10:45am to 12:00noon

Chelsey (Dahm) Bradley currently serves as Resident Choreographer at Dance Wisconsin, and teaches Modern Technique at Monona Academy of Dance. Ms. Bradley has been awarded the Monticello Award for Best Emerging Choreography, four National Choreographic Commissioning Awards from Regional Dance America, the Regional Dance America Choreography Connection Grant, and a Choreographic Honors Award from the University of Wisconsin-Madison.

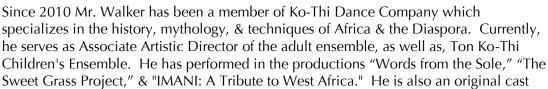


Ms. Bradley holds a Juris Doctorate from the University of Wisconsin, Madison, and is currently pursuing a Masters of Fine Arts in Dance at the Peck School of the Arts.

Class Summary: Dancers will begin with a warm-up utilizing breath as an impetus for movement, and grounding the body through core strength and articulation of the joints. The remainder of the class will explore weighted and released movement through traveling and stationary phrases, and will culminate with a dynamic movement phrase that emphasizes artistic expression.

West African/Afro-Caribbean Technique with DeMar Walker - 12:15pm to 1:30pm

DeMar Walker is a native of Milwaukee, Wisconsin. In 2006, he graduated from the University of Central Arkansas with a Bachelor of Arts Degree in Mass Communications & Theatre.





member of the theatre production "Pieces: In My Own Voice." With its mission to raise awareness on mental health, the play toured Washington D.C. in 2015. He also received rave reviews from the news publication *Shepherd Express* for his solo works "To The Morning" & "Solemn Games" which he performed in the Danceworks show "IGNITE: A Hip Hop Experience." Mr. Walker is also the Associate Artist & Lecturer in the Performance & Choreography of Africa and the Diaspora Track at the University of Wisconsin-Milwaukee's Peck School of the Arts/Department of Dance.

Class Summary: The class will focus on traditional West African/Afro-Caribbean techniques fused with contemporary hip hop styles.

Agreement for Assumption of Risk, Indemnification, Release, and Consent for Emergency Treatment

I, (print name), desire to participate voluntarily in the Wisconsin Dance
Council Event-Master Class on July 10, 2016.
I UNDERSTAND THAT I AM BEING ASKED TO READ EACH OF THE FOLLOWING PARAGRAPHS CAREFULLY. I UNDERSTAND THAT IF I WISH TO DISCUSS ANY OF THE TERMS CONTAINED IN THIS AGREEMENT, I MAY CONTACT THE WISCONSIN DANCE COUNCIL , AT TELEPHONE NUMBER (608) 535-9932.
Assumption of Risks:
I understand that physical activity related to Wisconsin Dance Council Event—Master Class, by its very nature, carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. Some of these involve strenuous exertions of strength using various muscle groups, some involve quick movement involving speed and change of direction, and others involve sustained physical activity, which places stress on the cardiovascular system. The specific risks vary from one activity to another, but in each activity the risks range from: 1) minor injuries such as scratches, bruises, and sprains, to 2) major injuries such as fractures, internal injuries, joint or back injuries, heart attacks, and concussions, to 3) catastrophic injuries including paralysis and death. I understand that the Wisconsin Dance Council has advised me to seek the advice of my physician before participating in this activity. I understand that I have been advised to have health and accident insurance in effect and that no such coverage is provided for me by the Wisconsin Dance Council. I KNOW, UNDERSTAND, AND APPRECIATE THE RISKS THAT ARE INHERENT IN THE ABOVE-LISTED PROGRAMS AND ACTIVITIES. I HEREBY ASSERT THAT MY PARTICIPATION IS VOLUNTARY AND THAT I KNOWINGLY ASSUME ALL SUCH RISKS.
Signature: Date:
Signature: Date: If participant is under 18, a parent or guardian must sign this form, not the participant.
Print name of parent or guardian if participant is under 18:
Hold Harmless, Indemnity and Release:
In consideration of permission for me to voluntarily participate in Wisconsin Dance Council Event-Master Class , today and on all future dates, I, for myself, my heirs, personal representatives or assigns, agree to defend, hold harmless, indemnify and release, the Wisconsin Dance Council , and their officers, employees, agents, and volunteers, from and against any and all claims, demands, actions, or causes of action of any sort on account of damage to personal property, or personal injury, or death which may result from my participation in the above-listed program. This release includes claims based on the negligence of the Wisconsin Dance Council , and their officers, employees, agents, and volunteers, but expressly does not include claims based on their intentional misconduct or gross negligence. I UNDERSTAND THAT BY AGREEING TO THIS CLAUSE I AM RELEASING CLAIMS AND GIVING UP SUBSTANTIAL RIGHTS, INCLUDING MY RIGHT TO SUE.
Signature: Date:
If participant is under 18, a parent or guardian must sign this form, not the participant.
Consent for Emergency Treatment:
I authorize the Wisconsin Dance Council and its designated representatives to consent, on my behalf, to any emergency medical/hospital care or treatment to be rendered upon the advice of any licensed physician. I AGREE TO BE RESPONSIBLE FOR ALL NECESSARY CHARGES INCURRED BY ANY HOSPITALIZATION OR TREATMENT RENDERED PURSUANT TO THIS AUTHORIZATION.
Signature: Date:
Signature: Date: If participant is under 18, a parent or guardian must sign this form, not the participant.