SUBURBAN MACOMB ICE



2025 Hours Specations

Presented by
Onyx-Suburban Skating Academy
& Suburban Ice Macomb

SUNDAY, DECEMBER 14TH, 2025 12:30pm



This year, the show will be a benefit performance for the Selfridge Support Group

SEE US AT THE FRONT DESK FOR MORE DETAILS!

Suburban Ice Macomb and the Onyx Suburban Skating Academy, will be hosting our 22nd Annual charity ice show on Sunday, December 14th. The show will serve as a benefit performance for the SELFRIDGE SUPPORT GROUP. This will also allow our skaters the opportunity to display their talents and achievements accomplished throughout the past year. The focus of the show will be on skaters at the preliminary level and below to give them the opportunity to shine. All OSA & ASPIRE members along with skaters currently enrolled in Learn to Skate classes with Suburban Skating School-Macomb or Rochester are welcome and encouraged to apply. All participants and volunteers 18 years of age and over are required to have background checks and be SafeSport Certified.

ICE SHOW DATE AND TIME:

Sunday, December 14th, 2025, at 12:30 pm

LOCATION:

SUBURBAN ICE MACOMB 54755 Broughton Road Macomb, MI 48042

APPLICATION DUE DATE:

- Thursday, October 16th, 2025
- Email address MUST be included on the application as all communication regarding the show will be communicated via email

GROUP NUMBER APPLICATION FEES AND INFORMATION:

- ALL ages and levels welcome
- The Group Number will be offered to Learn to Skate, ASPIRE & Introductory Members of the OSA ONLY
- \$100.00 application fee per skater for the Group Number
- Please make checks payable to: SUBURBAN ICE MACOMB
- Application fees will go toward costumes, ice costs, coaching fees and decorations
- ALL PRACTICES ARE MANDATORY

GROUP REHEARSAL DATES & TIMES:

- Tentative Practice Times are below. Confirmed schedules will be emailed by November 3rd:
 - Saturday, November 15th 4:45-6:00 pm
 - Sunday, November 23rd 4:30-5:15 pm
 - Sunday, December 7th 12:35-1:25 pm
 - Sunday, December 14th 10:30-11:15 am
 - Sunday, December 14th SHOW TIME!!! 12:30 pm

QUESTIONS: Please contact Brenda Willhite @ 586-992-8600 / bwillhite@suburbanice.com

2025 HOLIDAY SPECTACULAR GROUP # APPLICATION

Skater's	n on
Name:	DOB:
YY	
Home	
Address:	
Primary Name:	Parent Contact
Phone#:_	EMail:
CDOUD	\$100 application fee made payable to SUBURBAN ICE MACOMB
GROUP	*Application fee applied toward ice practice time, coaching fees and costumes.
I cown to	Strate A SDIDE and Introductory OSA members:
Closs I o	vel Currently Enrolled: Macomb or Rochester? asurements (in inches) Required for costume order: Bust/Chest: Waist: Hips: Street Clothing
Skater Me	asurements (in inches) Required for costume order:
Girth:	Bust/Chest: Waist: Hips: Street Clothing
Size:	
	measure girth, place a tape measure at the top of the shoulder (typically where a standard leotard strap sits), then over the apex (fullest part of the chest), down through the crotch and back up to the same shoulder. Measuring tape should follow close to the body shape. • Bust/Chest - Measure over the apex (fullest part of the chest) with your arms relaxed at your sides. Tape must be horizontal around the body. • Waist - Find your natural waist breakpoint by bending to the side (typically 1" to 1 1/2" above the belly button). Stand straight and measure around your natural waist breakpoint. Make sure breathing is relaxed during this measurement. Tape must be horizontal around the body. • Hips - Measure around the fullest part of the hips and buttocks while standing with your feet together. Tape must be horizontal around the body.
group w approxir Agreement of In considera I for myself, Ice Macomb	ill be confirmed via email by November 3 rd , 2025. Group practices will begin nately four weeks prior to the show. <u>Reserved</u>
Parent Signature:	Date:
FOR OFF	ICE USE ONLY:
Cach	Check Credit/Debit
QUESTI	ONS: Please contact Brenda Willhite @ 586-992-8600 / bwillhite@suburbanice.com

2025 HOLIDAY SPECTACULAR SOLO/FEATURE

APPLICATION (OSA/ASPIRE CONTRACTED SKATERS ONLY)

Name:		DOB:	
Address:			
City:	State:	Zip:	
PrimaryParent's Name:	Name:		
Home#:Email:	Other#:		
SOLOIST APPLICATION: \$50 app	plication fee made payable	to SUBURBAN ICE MACOMB	
Freestyle Level Passed as of Octobe	er 16 th , 2025:		
MITF/SKILLS Level Passed as of	October 16 TH 2025:		
Coach Signature:			
FEATURE APPLICATION: \$40.0	00 application fee per skate	er made payable to	
SUBURB	AN ICE MACOMB		
All feature members must turn in a each application 1) 2) 3) 4) 5)			
HOLIDAY SPECTACULAR APPLICA	TIONS ARE DUE BY THURS	DAY, OCTOBER 16 TH , 2025	

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