



## Pre-Tryout Readiness Clinics 2009

### 11-12U

Tuesday, October 20<sup>th</sup>

Wednesday, October 28<sup>th</sup>

Tuesday, November 3<sup>rd</sup>

### 13-14U

Thursday, October 22<sup>nd</sup>

Tuesday, October 27<sup>th</sup>

Thursday, November 5<sup>th</sup>

**ALL CLINICS WILL BE HELD 7:00-9:00PM  
THE COURTS**

8930 South 137<sup>th</sup> Circle, Omaha NE 68138

**Ages: 10U-14U (3<sup>rd</sup> grade-8<sup>th</sup> grade)**

**Cost: \$25/clinic session pre-register**

**\$30/clinic session walk-ins**

The Pre-Tryout Readiness Clinics are designed to prepare your daughter for the Club Tryout on Saturday, November 7th. All players will participate in drills that focus on passing, serving, setting & attacking, as well as court awareness. Your daughter will gain experience in a tryout setting as well as feedback from the Premier Coaching Staff.

**Questions: email Amy McLeay [amcleay@yahoo.com](mailto:amcleay@yahoo.com)**

**Mail registrations to: Premier Performance 1209 N. 161<sup>st</sup> Circle Omaha, NE 68118**

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

School: \_\_\_\_\_ Club: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Register my daughter for: Clinic 1. \_\_\_\_\_ DATE \_\_\_\_\_

Clinic 2. \_\_\_\_\_ DATE \_\_\_\_\_

Clinic 3. \_\_\_\_\_ DATE \_\_\_\_\_

As parent/guardian for \_\_\_\_\_, I hereby give my permission for her to participate in the Premier Performance Volleyball Clinic, and on behalf of my daughter, do hereby assume all risks of participation. I release any and all claims or liability of all staff and personnel associated with Premier Performance, Premier Volleyball and The Courts.

\_\_\_\_\_  
Print Name of Parent or Guardian

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

\_\_\_\_\_  
Date