

# 2008 Premier Basketball Clinics

Boys and girls in grades 3<sup>rd</sup>-7<sup>th</sup>

@ Issaquah Parks & Recreation

[www.premierhoops.net](http://www.premierhoops.net)

Players will learn sound fundamental offensive skills and techniques that will make them a more explosive player, just in time for the upcoming 2008-2009 season. Clinics will be directed by Bellevue CC Head Men's Basketball Coach, Jeremy Eggers, who's teams have won three of the past four NWAACC North Division Championships, a 2<sup>nd</sup> place finish in the 2007 NWAACC Tournament and 7<sup>th</sup> place finish in the 2008 NWAACC Tournament along with two Coaches of the Year awards. Assisting Coach Eggers will be BCC Men's and Women's assistant coaches, area high school, college and former college players.

## Instructional Highlights:

Players will have the opportunity to improve their existing skills and learn new ones. Our clinic staff is dedicated to teaching players the following skills:

- Ball handling
- Triple threat moves
- Shooting form
- Pull-up and spot up shooting
- Post moves
- Setting and using the screen and roll
- Attacking the basket
- Offensive confidence

## Schedule of Clinics:

Session 1 – September 13, 20 & 27<sup>th</sup>  
10:00am-12:00pm

Session 2 – October 11, 18 & 25<sup>th</sup>  
10:00am-12:00pm

## Clinic Cost:

Session cost \$80 each or \$70 each if signing up for both clinics.

Ex: 1 session \$80 both sessions \$140 per player.

All clinics will take place at Issaquah Parks and Recreation gymnasium located at: 301 Rainer Blvd S, Issaquah, WA 98027 425-837-3300

Email confirmations will be sent out once payment and registration form have been processed. **Players must provide their own ball.**

**Cancellation policy:** Cancellations made 10 days in advance will receive full refund. Cancellations made within 10 days to the start of camp will be charged a fee of \$25. Sorry no refunds after start of each clinic session.

**Please make checks payable to "Premier Basketball" and send with bottom portion of this form to:  
Premier Basketball, 15939 NE 55<sup>th</sup> Way, Redmond, WA 98052 425-269-8262 premierhoops@hotmail.com**

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## **Registration Form: 2008 Premier Basketball Clinics @ Issaquah Parks & Rec**

Session 1 – 9/13, 20 & 27<sup>th</sup>

Session 2 – 10/11, 18 & 25<sup>th</sup>

Player's Name: \_\_\_\_\_ Gender: M F Grade: \_\_\_\_\_

Phone: h \_\_\_\_\_ c \_\_\_\_\_ Session(s) \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

### **Release of Liability—permission to play basketball**

I authorize all medical, surgical, diagnostic and hospital procedures as may be performed or prescribed by a treating physician for my child, if I cannot be reached in an emergency. I further agree that neither I nor my child, will bring any claims of any kind against Premier Basketball, Issaquah Parks & Recreation and/or its basketball clinic employees as a result of any injuries, expenses, or damages that I, or my child may suffer in connection with my child's participation in the clinic, whether such claims are known or unknown or arise in the future.

Parent/guardian name: \_\_\_\_\_ Email: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_