

# 4th Annual Mid-Nebraska Youth

## Softball Clinic March 29th, 2020

Grand Island Field House

525 E. Fonner Park RD., Grand Island, NE.

For girls ages 8-16 of ALL SKILL levels. This clinic offers great instruction no matter the skill level.

A 2020 Clinic T-shirt and Lunch are provided!



### 2020 Clinic Staff

**Brock Culler**  
Head Softball Coach  
Grand Island Central Catholic HS



- 7 Years as Head Coach at GICC
- 147-75 record
- 3 time conference champion

**Rich Eber**  
Head Softball Coach  
Seward HS



- 2017 Class B State Runner-up
- 2019 Class B State 3<sup>rd</sup> Place
- Played Baseball at UNK

**Ashley Ford**  
Head Softball Coach  
Cozad HS



- Played at Elkhorn HS
- 2008-2012 Played for the Huskers
- 2014-2017 Assistant Coach at Bennington

**Pete Theoharis**  
Assistant Softball Coach  
Hastings College



- Assistant coach at Hastings College

**Chris Weiss**  
Assistant Softball Coach  
Grand Island Central Catholic HS



**Maria Tibbetts**  
Infield/Catchers Coach  
Grand Island Central Catholic HS



**Eric Williams**  
Pitching Coach  
Grand Island Central Catholic HS



**SESSION 1 DEFENSE**

Throwing/Glove Work  
Infield/Outfield Mechanics

9:00 am - 11:30 am



**SESSION 2 OFFENSE**

Hitting/Bunting/  
Slapping

12:00 pm - 1:50 pm



**SESSION 3 SPECIALTY**

Pitchers/Catchers

2:00 pm - 3:00 pm

return bottom portion along with payment to the address below

**DEADLINE IS WED., MARCH 18TH TO GUARANTEE A T-SHIRT. WALK INS ARE WELCOME THE DAY OF THE CLINIC**

Athletes Name:

Age:

T-Shirt Size:

Parent/Guardian Name (print):

Cell Number:

check which session(s) you will be attending

Session 1

Session 2

Session 3




- 1 Session = \$35
- 2 Sessions = \$65
- 3 Sessions = \$75

**\* must register for 2 or more sessions to get lunch**

**Make Checks Payable and Mail to:**

GICC Softball  
1200 North Ruby Ave.  
Grand Island, NE. 68801

I \_\_\_\_\_, understand that softball is a sport and injuries sometime occur. I will not hold GICC or any of the clinic staff responsible for any injury that may occur to my daughter(s) \_\_\_\_\_ at the softball clinic. I also grant permission for the people in charge to seek/administer medical help for any injury that may occur. I also understand that I will be notified of any injury as soon as possible.

Parent/Guardian Signature

Date