

# WI Club



## Club Youth Training and Tournament Play Winter/Spring 2026

Divisions	Times	Sunday/	Times	Thursday	Tournament*
					<b>Fri</b>
Grades 5–6	6:00-7:30pm	Dec 7, 14, 21 Jan 4, 18, 25 Feb 1, 8, 15, 22 Mar 1, 8, 15, 22	4:00-5:30pm	Dec 4, 11 18 Jan 8, 15, 22, 29 Feb 5, 12, 19, 26 March 5, 12, 19, 26	Fri Jan 9 Fri Feb 6 Fri Feb 27 Fri March 13
Divisions	Times	Sunday	Times	Thursday	Tournaments*
					<b>Fri &amp; Sun</b>
Grades 7–8	7:30-9:00pm	Dec 7, 14, 21 Jan 4, 18, 25 Feb 1, 8, 15, 22 Mar 1, 8, 15, 22	4:00-5:30pm	Dec 4, 11 18 Jan 8, 15, 22, 29 Feb 5, 12, 19, 26 March 5, 12, 19, 26	Fri Jan 16 Fri Feb 20 Fri March 6 Fri March 20

**Location:** Center Court for ALL activities 815 Northview Road, Waukesha, WI 53188

**Format:** 14-week program - 2 Practices a week  
 1<sup>st</sup> Practice is 90 min session – with lead coaches and team coaches directed at skill development, footwork, ball control, and court related movement  
 2<sup>nd</sup> Practice is 90 min session – with your team and coach focused on teamwork, offense and defense systems, skill development and more  
 4 Tournaments consisting of 6 sets

**Teams:** We will have a placement practice to evaluate & create teams.

**Coaches:** Lead Coaches – Multiple coaches to train skills & fundamentals  
 Team Coaches – One coach assigned per team for team practice & tournament play

**Participants:** Designed for those athletes, who would like a club like experience on a new level.

- shorter season
- local program, no travel
- fits busy schedules
- manages multi-sport athletes
- works for multiple family activities and or children.



**5/6 Level:** This level is designed for girls who are in 5-6<sup>th</sup> grades.

**7/8 Level:** This level is designed for girls who are in 7-8<sup>th</sup> grades.

**Cost:** \$795 for Training sessions, Tournaments, Uniform Jersey, & Practice T-Shirt.

**Register:** Register online [www.midwestpenguins.com](http://www.midwestpenguins.com) /

**Registration Deadline: Due to high demand of the program, it will close when full.**

Program	Start Date	Amount	Total
Session	Starts Dec 4	\$795	\$ _____
<b>Circle Practice T-Shirt</b>	<b>Youth Size M L</b>	<b>Adult Size S M L XL other</b>	
<b>Circle Jersey Size</b>	<b>Youth Size M L</b>	<b>Adult Size S M L XL other</b>	

**Athlete Name:** \_\_\_\_\_ **Female** **Grade** \_\_\_\_\_ **Phone ( )** \_\_\_\_\_

**Email Address(s):** \_\_\_\_\_

**Emergency Contact:** \_\_\_\_\_ **Phone Number: ( )** \_\_\_\_\_

**Medical Information:** - Please list and explain specific health concerns including physical limitations/restrictions:

State any specific instructions for medical care and emergencies:

I verify that my child has been checked by a licensed physician and is physically able to participate in the Volleyball camp. I have read and am aware of concussion symptoms and will complete necessary release. I agree there is potential for injury in an event like this. I agree if any concussion like symptoms appear, participation will cease until medical clearance. Should any injury to my child occur, I assume full responsibility and costs related to injury.

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



**Midwest Penguins Volleyball - PARTICIPANT RELEASE OF LIABILITY**

**Sep. 1, 2025 through Oct 31, 2026 -- READ BEFORE SIGNING**

In consideration of being allowed to participate in any way in the program, related events and activities, I the undersigned, acknowledge, appreciate, and agree that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, BUT NOT GROSS NEGLIGENCE OF THE RELEASEES; or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If however I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS THE Midwest Penguins Volleyball LLC, their officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event (RELEASEES), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT AND INDUCEMENT.

**X** \_\_\_\_\_  
Participant's Signature Age Date

**FOR PARENTS/GUARDIANS OF PARTICIPANT OF MINOR AGE**

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liability incidents to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

**X** \_\_\_\_\_  
Parent/Guardian Signature Date Emergency Phone Number(s)