

P.O. Box 71, Moonee Vale 3055

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BLACKBURN PRIMARY SCHOOL

WHEN: MONDAY Starts: 12th October Finishes: 14th December TIME: 3.40 pm – 4.40pm YEAR LEVELS: PREP - 4
WILD WINTER SPORTS - SOCCER – BASKETBALL – HOCKEY – CRICKET – TEAM GAMES

This program is a fantastic way to challenge and improve your child's motor and coordination skills. Our experienced coaches aim to develop and enhance the wide range of sporting skills of your child, including catching, kicking & throwing. While also improving strength, flexibility, hand-eye co-ordination, spatial awareness, co-operative skills and teamwork, all within a <u>FUN</u> and very <u>SAFE</u> environment.



BASKETBALL

WHEN: WEDNESDAY Starts: 14th October Finishes: 16th December TIME: 3.40 pm - 4.40pm YEAR LEVELS: PREP - 4

Speed! Precision! Athleticism! Fun! Vibrant 9 week Basketball program we have on offer. This Basketball Program includes all the skills and activities required to help enhance your child's ability. Hop on board and shoot a goal!

END OF YEAR CHEER

WHEN: THURSDAY Starts: 15th October Finishes: 17th December TIME: 3.40 pm - 4.40pm YEAR LEVELS: PREP - 4

IT'S THE END OF THE YEAR AND IT'S TIME TO CHEER! Join us for our Cheerleading program for boys and girls as the kids learn weekly moves and learn a routine to perform at the end of the year.

GET IN QUICK FOR TERM 4 AS PLACES ARE FILLING FAST \$100 FOR 10 WEEK PROGRAM



NEW IMPROVED ONLINE BOOKING SYSTEM!!!

SIMPLY GO TO <u>WWW.KELLYSPORTS.COM.AU</u> ENTER YOUR POST CODE AND ENROL FROM THERE. OR FILL OUT THE BELOW ENROLMENT FOR & SEND WITH A CHEQUE OR CREDIT CARDS DETAILS TO:

PO BOX 71, MOONEE VALE, 3055

PAYMENT OPTIONS AVALIABLE!

ENROLMENT FORM

Wild Winter Sports	Netball	End of Year Cheer
School:		Year Level:
Name:		Room No:
Address:		Post Code:
Phone:	Mobile/Work:	
Email:	Medical Conditions:	
At the completion of after school clinics, does your child?	Go to after care Get collected	
Parents' consent: I hereby authorise Kelly Sports to act on my behalf should my child require medical attention, and release Kelly Sports North West from any liability for injury incurred by my child at Kelly Sports programs.		
Parent/Caregiver name:	Signature:	
Amount Paid: \$	Credit card payment: Visa Mas	ter card
Card Number:	Expiry I	Date: CVV: CVV: