 P.O. Box 71, Moonee Vale 3055

**FOLLOW US ONLINE!**

**T** (03) 9384 2204

**F** (03) 9384 2205

**E** mitch@kellysports.com.au

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 **GREENVALE PRIMARY SCHOOL**

**AWESOME AUTUMN SPORTS**

****

**WHEN: Thursday**

**COMMENCING: 26/04/18**

**CONCLUDING: 28/06/18**

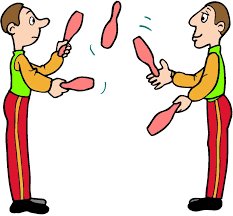
**TIME: 3.40pm – 4.40pm**

**YEAR LEVELS: P – 4**

**COST: $120**

**AFL - SOCCER-BASKETBALL-HOCKEY – TEAM GAMES**Start the new school term by enrolling in this fantastic Kelly sports program. Join up with your friends and develop your skills in a fun, safe an exciting sporting environment. Our experienced coaches aim to develop and enhance the wide range of sporting skills of your child including kicking catching & throwing while also improving strength, flexibility, hand-eye co-ordination, Spatial awareness, co-operative and teamwork





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**COST: $120**

**CIRCUS SKILLS**

**WHO LIKES TO ACT LIKE A CLOWN!** Learn to juggle, spin plates, use devil sticks and have lots of fun with all our exciting circus skills program. This program also includes skipping drills, hula hoops and encourages participants to use their creative minds to put together their own circus performance.



**GET IN QUICK FOR TERM 2 AS PLACES FILLING FAST**

**It’s here online enrolments !**

**To enrol**, please visit [www.kellysports.com.au](http://www.kellysports.com.au) or

fill out the enrolment form & **send** with a cheque or credit card details to:

Kelly Sports PO BOX 71, Moonee Vale, VIC, 3055.

Payment options available!

Do **not** leave enrolment forms at the school office

**$120 FOR 10 WEEK PORGRAM**

**­**

NEW IMPROVED ONLINE BOOKING SYSTEM!!!

SIMPLY GO TO [WWW.KELLYSPORTS.COM.AU](http://WWW.KELLYSPORTS.COM.AU) ENTER YOUR POST CODE AND ENROL FROM THERE. OR

FILL OUT THE BELOW ENROLMENT FORM & SEND WITH A CHEQUE OR CREDIT CARDS DETAILS TO:

**PO BOX 71, MOONEE VALE, 3055**

PAYMENT OPTIONS AVALIABLE!

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**ENROLMENT FORM**

□ **Awesome Autumn Sports** □ **Circus Skills**

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 Nth West from any liability for injury incurred by my child at Kelly Sports programs.**

Parent/Caregiver name: Signature:

Amount Paid: $ Credit card payment: □ **Visa** □ **Master card**

Card Number: □□□□ □□□□ □□□□ □□□□Expiry Date: □□/□□CVV:□□□

**THINGS TO KNOW**

Kelly Sports is a Registered Child Care provider

Don’t leave forms at the School Office

Spaces are limited so please make sure you enrol online or return form to Kelly Sports.

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