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**MULTI -SPORTS** PROGRAM 1 2019

035 045 A/C No 342581. For further information about your Sports



## SIZZLING SUMMER SPORTS **ROSARY PRIMARY SCHOOL**



Voucher eligibility please visit www.sportsvouchers.sa.gov.au. **ENROLMENT FORM** 

School:			Year Level:	
Name:			D.O.B:	
Address:			Post Code:	
Phone:	Mobile	Work:		
Email:				
Medical Conditions:				
	y Sports clinics, does your child			
		on my behalf should my child requ ncurred by my child at Kelly Sports		d release
I consent to my child's	photo being taken for use in pron	notional material by Kelly Sports.		
Parent/Caregiver name:		Signature:		
Amount Paid: \$	by Cash / Cheque / Internet	transfer (date)		
Statement of commitment to child safety	Child <b>Safe</b> References to the program a safe process	ly Sports is a learning destination for	the Children's University	
All children who come to Kelly Sports have a	right to feel and be safe. The welfare of t	the children in our care will always be our fir	st priority and we have a zero t	olerance to child abuse.
We aim to create a child safe and child frier	dly environment where children feel safe	and have fun. This policy was developed in a	collaboration with all our staff,	volunteers and the

children who use our services and their parents. It applies to all staff, volunteers, children and individuals involved in our organisation.

## **ENQUIRE NOW ABOUT A KELLY SPORTS BIRTHDAY PARTY FOR YOUR CHILD**