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## BEFORE SCHOOL CARE ST. MONICA'S PRIMARY SCHOOL

# FOLLOW US

**ONLINE** 



## MEGA MULTI-SPORTS

CRICKET – TENNIS – T-BALL – ATHLETICS- FOOTY NETBALL – SOCCER – HOCKEY-VOLLEYBALL - TOUCH RUGBY-PARACHUTE GAMES - BASKETBALL – DANCE - ULTIMATE FRISBEE-CRAZY GAMES

Kick start your child's morning with a Multi -Sports session covering a variety of FUN & ENGAGING sports every day of the week! \*One sport covered each day as listed above.

\*Enrol for the term, week or just the day, the choice is up to you!

<u>\*PLEASE NOTE\*</u> Every Friday morning we will be running a CIRCUS & GYMNASTICS session

| WHEN:<br>WHERE:    | Monday-Friday<br>St. Monica's PS |
|--------------------|----------------------------------|
| COMMENCING:        |                                  |
| <b>CONCLUDING:</b> | 19/12/18                         |
| DURATION:          | 1 hr (5 days a wk)               |
|                    | 11 weeks                         |
| TIME:              | 7:30am – 8:30am                  |
| YEAR LEVELS:       | P – 6                            |
| COST:              | \$17 per session                 |

Our experienced coaches aim to develop and enhance the wide range of sporting skills of your child, including catching, striking & throwing. While also improving strength, flexibility, hand-eye co-ordination, spatial awareness, co-operative skills and teamwork, all within a FUN and very SAFE environment.

### **GET IN QUICK FOR TERM 4 AS PLACES ARE FILLING FAST!!**

\*\*EARLY BIRD SPECIAL OFFER\*\* If you enrol your child in any program before Sunday 21st October you'll receive ALL bookings at \$15 per session!!

#### NEW & IMPROVED ONLINE BOOKING SYSTEM!

SIMPLY GO TO <u>WWW.KELLYSPORTS.COM.AU</u> ENTER YOUR POSTCODE AND ENROL FROM THERE OR FILL OUT THE BELOW ENROLMENT FORM & SEND WITH A CHEQUE OR CREDIT CARD DETAILS TO: 12 METROPOLITAN DRIVE, EAGLEHAWK VIC 3556 PAYMENT OPTIONS AVALIABLE!

### **ENROLMENT FORM**

| Before School Care: Mega Multi Sp | orts  |                                   |  |
|-----------------------------------|---|-----------------------------------|--|
| School:                           |   | Year Level: DOB:                  |  |
| Name:                             |   | Room No:                          |  |
| Address:                          |   | Post Code:                        |  |
| Phone:                            | Mobile/Work:  |                                   |  |
| Email:                            | Medical Conditions:   |                                   |  |
| Emergency Contact:                | Phone:  | Relationship:                     |  |
| Photo consent                     |   |                                   |  |
|                                   | y Sports to act on my behalf should my chil<br>rom any liability for injury incurred by my ch   |                                   |  |
| Parent/Caregiver name:            | Sig   | nature:                           |  |
| Amount Paid: \$                   | Credit card payment:  | Visa Master card                  |  |
| Card Number:                      |   | Expiry Date:                      |  |
|                                   | <u>THINGS TO KNOW</u><br>Kelly Sports is a Registered Child C<br>Don't leave forms at the Schoo |                                   |  |
| Spaces                            | are limited so please make sure you enrol onlin   | ne or return form to Kelly Sports |  |