



BEFORE SCHOOL CARE ST. MONICA'S PRIMARY SCHOOL

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!

PLEASE NOTE Every Friday morning we will be running a **CIRCUS & GYMNASTICS** 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.

WHEN: Monday-Friday
WHERE: St. Monica's PS
COMMENCING: 16/04/18
CONCLUDING: 29/06/18
DURATION: 1 hr (5 days a wk)
10 weeks
TIME: 7:30am – 8:30am
YEAR LEVELS: P – 6
COST: \$12 per day



GET IN QUICK FOR TERM 2 AS PLACES ARE FILLING FAST!!

****EARLY BIRD SPECIAL OFFER**** If you enrol your child in any program before **Sunday 22nd April** you'll receive **ALL bookings at \$10 per session!!**

NEW & IMPROVED ONLINE BOOKING SYSTEM!!

SIMPLY GO TO WWW.KELLYSPORTS.COM.AU 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 AVAILABLE!

ENROLMENT FORM

☐ Before School Care: Mega Multi Sports

School: _____ Year Level: _____ DOB: _____

Name: _____ Room No: _____

Address: _____ Post Code: _____

Phone: _____ Mobile/Work: _____

Email: _____ Medical Conditions: _____

Emergency Contact: _____ Phone: _____ Relationship: _____

Photo consent ☐

Parents' consent: I hereby authorise Kelly Sports to act on my behalf should my child require medical attention, and release Kelly Sports Bendigo 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