Kelly Sports - Berwick & Pakenham
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2 WEEKS OF **FUN** these SPRING HOLIDAYS!

SPRING HOLIDAY PROGRAM

Sports orientated holiday program designed to emphasise fun, enjoyment, confidence and skills with maximum participation. Children require a packed lunch, drink bottle & hat. Craft table and restful activities also provided.

Suitable for both GIRLS and BOYS — Kelly Sports is a registered childcare provider

VENUE: Berwick Chase Primary School Hall, 51 Bridgewater Blvd Berwick

WHEN: SPRING holidays
COMMENCING: MONDAY 21ST Sep
CONCLUDING: THURSDAY 1st Oct
TIME: 8.30am – 4.30pm
YEAR LEVELS: All ages

WEEK 1

Mon 21ST 8.30am-4.30pm	Football	Soccer	Gym	Dance	Volleyball
Tue 22ND 8.30am-4.30pm	Basketball	CRICKET	Hockey	Hip Hop	Touch Rugby
Wed 23RD 8.30am-4.30pm	Football	Netball	Soccer	Basketball	Gym
Thu 24TH 8.30am-4.30pm	Soccer	Athletics	Volleyball	Hockey	Dance
Fri 25TH 8.30am-4.30pm	Football	Basketball	Soccer	Hip Hop	Netball

WEEK 2

Mon 28TH 8.30am-4.30pm	Netball	Football	Dance	Basketball	Soccer
Tue 29TH 8.30am-4.30pm	Basketball	CRICKET	Hockey	Gym	Touch Rugby
Wed 30TH 8.30am-4.30pm	Volleyball	Hip Hop	Soccer	Football	CRICKET
Thu 1ST 8.30am-4.30pm	Grand Final Footy Games!	Grand Final Footy Games!	Wear your footy gear!	Grand Final Footy Games!	Grand Final Footy Games!
Fri 2ND 8.30am-4.30pm	PUBLIC HOLIDAY	PUBLIC HOLIDAY	PUBLIC HOLIDAY	PUBLIC HOLIDAY	PUBLIC HOLIDAY

COST: $40 p/day (Kelly Sports is a registered childcare provider)

ONLINE ENROLMENT

www.kellysports.com.au

To **enrol**, please visit www.kellysports.com.au or fill out the below enrolment form & **send** with a cheque or credit card details to: PO BOX 2055, Fountain Gate VIC 3805, or **scan to: darren@kellysports.com.au** or **fax** to 03 8692 6539. **Internet Direct credit** BSB: 083-214 Acct No: 15-985-2563 Acc Name: Kelly Sports Berwick

ENROLMENT FORM

Week 1: Mon21ST ☐ Tue22ND ☐ Wed23RD ☐ Thu24TH ☐ Fri25TH ☐ **Week 2:** Mon28TH ☐ Tue 29TH ☐ Wed 30TH ☐ Thu 1ST (Footy Day) ☐

Name: _____ DOB: _____

Address: _____ Post Code: _____

Phone: _____ Mobile/Work: _____

Email: _____ Medical Conditions: _____

Parents' consent: I hereby authorise Kelly Sports to act on my behalf should my child require medical attention, and release Kelly Sports Berwick from any liability for injury incurred by my child at Kelly Sports programmes.

Parent/Caregiver name: _____ Signature: _____ Amount Paid: $ _____

Internet: ☐ Cash: ☐ Card payment: ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ Exp ☐☐/☐☐

2013 Winner: City of Casey Home Based Business! CASEY BUSINESS AWARDS 2013 Winner: Cardinia Business Awards **'Franchisee'**