Kelly Sports - Berwick & Pakenham
P.O. Box 2055, Fountain Gate VIC 3805
T Darren Michelle - 0402 224 116
F (03) 8692 6539
W www.kellysports.com.au
E darren@kellysports.com.au

Only **$40** Per Day!

DEC/JAN **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.

Quiet, restful activities also provided. Suitable for both GIRLS and BOYS

Kelly Sports is a registered childcare provider.

VENUE: Berwick Chase Primary School Gym
72 Viewgrand Dr Berwick

DECEMBER:

COMMENCING:	MONDAY 21st Dec
CONCLUDING:	THURSDAY 24th Dec
TIME:	8.30am – 4.30pm
YEAR LEVELS:	All ages

JANUARY:

COMMENCING:	MONDAY 18th Jan
CONCLUDING:	WEDNESDAY 27th Jan
EXCLUDING:	TUES 26th Aus Day
TIME:	8.30am – 4.30pm
YEAR LEVELS:	All ages

Schedule

MONDAYS	Netball	Tennis	Hip Hop	Basketball	Soccer
TUESDAYS	Basketball	CRICKET	Hockey	Gym	Touch Rugby
WEDNESDAYS	Volleyball	Hip Hop	Soccer	Football	CRICKET
THURSDAYS	Tennis	Athletics	Basketball	Soccer	Dance
FRIDAYS	Basketball	Soccer	Football	Hip Hop	Gym

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

DECEMBER : Mon 21st ☐ Tue 22nd ☐ Wed 23rd ☐ Thu 24th ☐

JANUARY: Mon 18th ☐ Tue 19th ☐ Wed 20th ☐ Thu 21st ☐ Fri 22nd ☐ Mon 25th ☐ Wed 27th ☐

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 ☐☐/☐☐