

# LYNDHURST

#### Kelly Sports Berwick, Pakenham, Seaford

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### SUPER SPRING SPORTS!

DON'T MISS OUT THIS SPRING! Spring Sports allows your child to play a range of dynamic and active sports over the 8 week program; these include cricket, tennis, soccer, basketball & crazy games! This multisport program will not only provide an essential base for your child's motor skills, but will also help build confidence and co-ordination, all in an enjoyable environment. TEAM PLAYER OF THE DAY TROPHY AWARDED EACH SESSION!

WHEN: COMMENCING: EXCLUDING: PERIOD: TIME: YEAR LEVELS:

TUESDAYS 14/10/14 - 09/12/14 Melbourne Cup 9 Weeks (\$90) 3:40pm - 4:40pm P-4



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## DYNAMIC DANCE!

GET MOVING WITH KELLY DANCE THIS SPRING! Shake, move & let the beat enter your feet with Kelly Sports Dance. Our fantastic Kelly Sports Dance teachers will get your child's hips swinging, heads bumping, feet rocking & bodies shaking! From contemporary, jazz to hip-hop and pop, this program provides something for everyone. Our dance program will build rhythm and confidence!

WHEN: **COMMENCING:** PERIOD: TIME: YEAR LEVELS: WEDNESDAY 15/10/14 - 10/12/14 9 Weeks (\$90) Lunchtime P-6



KELLY SPORTS IS A REGISTERED CHILD CARE PROVIDER

**ONLINE ENROLMENT** 

To **enrol**, please visit <u>www.kellysports.com.au</u> 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 www.kellysports.com.au search 'postcode' to: darren@kellysports.com.au or fax to 8692 6539. Internet Direct credit available BSB: 083-214 Acct No: 15-985-2563 Acct Name: Kelly Sports Berwick

## **ENROLMENT FORM**

SUPER SPRING Sports! Dynamic Dance!	
School: LYNDHURST PRIMARY	Year Level:
Name:	Room No:
Address:	Post Code:
Phone: Mobile/Work:	
Email: Me	edical Conditions:
At the completion of after school clinics, does your child? Go to after care Get collected	
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: S	Signature:
Amount Paid: \$ Internet Transfer: Credit card payment:	(online surcharge applies) Cheque: Cash:
Card Number:	Expiry Date:
Awards 2013 Winner: 2013 Cardinia Franchisee of the year!	usiness WARDS Winner: 2013 Casev Home Based Business