

P.O. Box 183, Black Rock 3193

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[www.facebook.com/KellySportsBayside](https://www.facebook.com/KellySportsBayside)

**CARNEGIE PS**

**![C:\Users\Pierre\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\IGYXSVZN\MM900286820[1].gif]()**

Children learn activities where balance, coordination, dexterity & group dynamics is the focus. They learn how to juggle, use spinning plates, devil sticks and more

**CIRCUS SKILLS**

**WHEN:** Friday

**COMMENCING:** 2/5/14

**CONCLUDING:** 27/6/14

**TIME:** 1.30-2.30

**YEAR LEVELS:** P – 4

**TRY A CLASS AT NO COST. EMAIL** pierre@kellysports.com.au

**FOR A FREE TRIAL CLASS. GREAT FOR BOYS AND GIRLS**

**![C:\Users\Pierre\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\TSZHWZWG\MC900439811[1].png]()**

**WHEN:** Friday

**COMMENCING:** 2/5/14

**CONCLUDING:** 27/6/14

**TIME:** 3.35-4.35

**YEAR LEVELS:** 1-4

Play Soccer with your friends in the Kelly Sports Soccer *Clinic. Learn all the skills and have fun playing the World Game*

**SOCCER**



**COST: $150** for Circus and **$115** for sports ($145 or $110 early bird if paid before 11/7/14)

**It’s here online enrolments!**

 **To enrol**, please visit [www.kellysports.com.au](http://www.kellysports.com.au) or

Fill out the enrolment form & **send** with a cheque or credit card details to:

Kelly Sports PO BOX 71, Moonee Vale, VIC, 3055.

Payment options available!

Do **not** leave enrolment forms at the school office

enrol online go to [www.kellysports.com.au](http://www.kellysports.com.au) and search for **Carnegie PS**

**VENUE: Carnegie Primary School**

**­**

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**ONLINE ENROLMENT**

**www.kellysports.com.au**

 **ENROLMENT FORM**

 □ **Circus** □ **Soccer**

School: Year Level:

Name: Room No:

Address: Post Code:

Phone: Mobile/Work:

Email: Medical 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 Brighton from any liability for injury incurred by my child at Kelly Sports programs.**

Parent/Caregiver name: Signature:

Amount Paid: $ Credit card payment: □ **Visa** □ **MasterCard**

Card Number: □□□□ □□□□ □□□□ □□□□ Expiry Date: □□/□□

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