

P.O. BOX 71, MOONEE VALE, VIC, 3055

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AMSLEIGH PARK PS

CALISTHENICS!

Experience this unique blend of sport and artistry at your own school. We offer Calisthenics as a sporting option with Calisthenics Victoria qualified coaches delivering a high quality 10 week program.

Calisthenics combines the elements of dance and movement including gymnastics, ballet, modern dance, apparatus (rods and flags). Learn routines choreographed to music, so that you can present these routines in front of an audience. Calisthenics encourages physical development, coordination, self-discipline and team spirit.

TUESDAY WHEN:

COMMENCING: 21 April '15

CONCLUDING: 23 June '15

TIME: 1.40pm - 2.30pm

YEAR LEVELS: P-6

KETBALL, FOOTY & SOCCER



We provide a range of dynamic activities over 10 weeks. 3 weeks each of Basketball and Soccer plus AFL Footy and Netball. Boys & Girls of all abilities welcome.

Our talented qualified and enthusiastic coaches will have your children kicking and shooting goals, developing skills in passing, dribbling, heading and helping their team to glory.

TUESDAY WHEN:

COMMENCING: 21 April '15

CONCLUDING: 23 June '15

3.35pm - 4.35pmTIME:

YEAR LEVELS: P-4

COST: \$100 (\$10 p/wk) each. Enrol online - go to www.kellysports.com.au

VENUE: At School. Calisthenics: Hall Basketball, Footy & Soccer: Meet on basketball court.



To enrol, please visit www.kellysports.com.au or fill out the enrolment form below & send with a cheque or credit card details or pay by internet banking: ANZ Bsb 013 030 A/c 4936 95452 (use child's first, last name as reference) Mail to: PO BOX 71, Moonee Vale, VIC 3055. Email info@kellysports.com.au

ENROLMENT FORM

Calisthenics (Lunch time)	Basketball, Footy & Soccer (After School)	
School: Amsleigh Park PS		Year Level:
Name:		Room No:
Address:		Post Code:
Phone:	Mobile/Work:	
Email:	Medical Conditions / Special Needs:	
At the completion of after school clinics, does your child? Parents' consent	Go to after care Get collecte	d
I hereby authorise Kelly Sports to act on my behalf shown any liability for injury incurred by my child at Kelly Sport I authorise the use by Kelly Sports of any photographs.	ts programmes.	
Parent/Caregiver name:	Signature:	
Amount Paid: \$	Credit card payment:	Mastercard CVV
Card Number:		Expiry Date: