



## CRICKET & SOCCER

Have fun in the sun this term! Cricket & Soccer is a dynamic and active program run over 10 weeks. Our experienced coaches will teach your child all the fundamental skills needed to become the next sporting superstar. This Program will not only provide an essential base for your child's motor skills but help build awareness, co-ordination and friendship all in an enjoyable environment.

**WHEN:** Tuesday  
**COMMENCING:** 13/10/15  
**CONCLUDING:** 15/12/15  
**TIME:** 3.35pm – 4.35pm  
**YEAR LEVELS:** P – 4  
**COST:** \$100



## CALISTHENICS

**Experience this unique blend of sport and artistry at your own school.** 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

**WHEN:** Thursday  
**COMMENCING:** 16/10/15  
**CONCLUDING:** 18/12/15  
**TIME:** 1.00pm – 1.50pm  
**YEAR LEVELS:** P – 4  
**COST:** \$100

**GET IN QUICK FOR TERM 4 AS PLACES FILLING FAST**  
**\$100 for 10 Week Program**



## NEW IMPROVED ONLINE BOOKING SYSTEM!!!

SIMPLY GO TO [WWW.KELLYSPORTS.COM.AU](http://WWW.KELLYSPORTS.COM.AU) ENTER YOUR POST CODE AND ENROL FROM THERE. OR  
FILL OUT THE BELOW ENROLMENT FOR & SEND WITH A CHEQUE OR CREDIT CARDS DETAILS TO:

PO BOX 71, MOONEE VALE, 3055  
PAYMENT OPTIONS AVAILABLE

# ENROLMENT FORM

☐ Cricket & Soccer

 Calisthenics

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 Knox-Waverley from any liability for injury incurred by my child at Kelly Sports programs.

Parent/Caregiver name: \_\_\_\_\_ Signature: \_\_\_\_\_

Amount Paid: \$  Credit card payment: ☐ Visa ☐ Master card

Card Number:                 Expiry Date:   /   CVV:

## THINGS TO KNOW

Kelly Sports is a Registered Child Care provider  
Don't leave forms at the School Office

Spaces are limited so please make sure you enrol online or return form to Kelly Sports.