

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

T (03) 9384 2204

F (03) 9384 2205

E info@kellysports.com.au



Early Bird rate \$9.50 / week, if you enrol by Friday 11th July.

CALISTHENICS!



Experience this unique blend of sport and artistry at your own school. We offer Calisthenics as a sporting option in partnership with Calisthenics Victoria, providing their qualified coaches to deliver high quality programs. 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: Wednesday

COMMENCING: 23 July '14

CONCLUDING: 17 Sept '14

TIME: 1.40 - 2.10pm

YEAR LEVELS: P-6

CKED WINTER SPORTS

ST JOHN VIANNEY'S PS



This 9 week program includes Aussie Rules Footy, Basketball or Netball, "World Cup" Soccer, Hockey or T-Ball. Boys & Girls of all abilities welcome. Our program is a fantastic way for your child to develop key sporting skills essential for all sports. It will inspire children to give sport a go as they develop their catching, throwing, kicking, striking, running and jumping skills. Our modified sports games provide lots of fun while skills are being developed.

Thursday WHEN:

COMMENCING: 24 July '14

CONCLUDING: 18 Sept '14

3.20pm - 4.20pm TIME:

YEAR LEVELS: P-4

\$95 each. Enrol online for \$90 - go to www.kellysports.com.au

Early bird rate of \$85.50, if you enrol online by Friday 11th July.

VENUE: At School. Calisthenics: Parish Hall Soccer: Meet on the Basketball court.



Calisthenics (Lunch time)

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

Wicked Winter Sports (After School)

chool: St John Vianney's PS	Year Level:
lame:	Room No:
ddress:	
hone:	Mobile/Work:
mail:	Medical Conditions / Special Needs:
t the completion of after school clinics, does your child?	Go to after care Get collected
arents' consent	
hereby authorise Kelly Sports to act on my behalf shouny liability for injury incurred by my child at Kelly Spor	ald my child require medical attention, and release Kelly Sports Dingley from ts programmes.
I authorise the use by Kelly Sports of any photograp	ohs or video image of my child or legal charge for any reasonable purpose.
arent/Caregiver name:	Signature:
mount Paid: \$	Credit card payment:
Sand Musekan	