

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

F (03) 9384 2205

T (03) 9384 2204

E info@kellysports.com.au



Early Bird rate \$9.50 / week, if you enrol by Friday 26<sup>th</sup> Sept.

## **CLARINDA PS**

## **SENSATIONAL SPRING SPORTS**



We provide a range of dynamic activities during our 10 week program including Basketball or Netball, "World Cup" Soccer and Cricket, Hockey or T-Ball. This program will not only provide an essential base for your child's motor skills but help build awareness and co-ordination, all in an enjoyable environment. 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.

WHEN: Friday

**COMMENCING:** 10 October '14

**CONCLUDING: 12 December '14** 

TIME: 3.35pm – 4.35pm

YEAR LEVELS: P-4

COST: \$100. Enrol online – go to www.kellysports.com.au

Early bird rate of \$95, if you enrol online by Friday 26<sup>th</sup> September.

VENUE: At School. Meet at the Shade Sail area.



To enrol, please visit <a href="www.kellysports.com.au">www.kellysports.com.au</a> 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 Do not leave enrolment forms at the school office.

## **ENROLMENT FORM**

	Sensational Spring Sports (After sch	1001)			
School:	Clarinda PS			Year Level:	
Name:				Room No:	
Address:				Post Code:	
Phone:		Mobile/Work:			
Email:		Medical Conditions / S	pecial Needs:		
At the cor	mpletion of after school clinics, does your child?	Go to after care	Get collected		
Parents'	consent				
	authorise Kelly Sports to act on my behalf should		cal attention, and rele	ease Kelly Sports	Dingley from
	lity for injury incurred by my child at Kelly Sports				
I authorise the use by Kelly Sports of any photographs or video image of my child or legal charge for any reasonable purpose.					
Parent/Ca	aregiver name:		Signature:		_
			П.,, П.,		
Amount P	Paid: \$	Credit card payment:	└ Visa └ Mas	tercard CVV	
Card Nur	mber:			Expiry Date:	