 P.O. Box 71, Moonee Vale 3055

 **T** (03) 9384 2204

 **F** (03) 9384 2205

**Book early to**

**Secure your**

**Place!**

 **E** sonya@kellysports.com.au

**WILLIAMSTOWN NORTH PRIMARY**

**DANCE DANCE DANCE!**

****

Shake, move and let the beat enter your feet with Kelly Sports. Our trained dance coaches can get your child’s **hips swinging, heads bumping, feet rocking and bodies shaking** to all of modern contemporary music’s classics. Sign up fast as places are limited and let our coaches beat ignite your child’s dancing feet.

**WHEN:** Wednesday

**COMMENCING:** 16/7/2014

**CONCLUDING:** 17/9/2014

**TIME:** 1:00pm – 2:00pm

**YEAR LEVELS:** P – 4



 ****

Don’t miss out on this fabulous Winter action, with our Wicked Winter Sports. This program allows your child to experience a fun, energetic and highly active multi-sport program over **10 lively weeks**! These include: **Dodgeball, Soccer, Footy and Turbo Touch .** 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.

**WHEN:** Monday

**COMMENCING:** 14/7/2014

**CONCLUDING:** 15/9/2014

**TIME:** 3:40pm – 4 :40pm

**YEAR LEVELS:** P – 4

 **Wicked Winter Sports**



**COST: $100**

**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

**VENUE: Williamstown North Primary School**

**­**

**It’s here online enrolments !**

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 **ENROLMENT FORM**

□ **Dance Dance Dance**! □ **Wicked Winter Sports**

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 Essendon from any liability for injury incurred by my child at Kelly Sports programmes.**

Parent/Caregiver name: Signature:

Amount Paid: $ \_\_\_\_\_\_\_\_\_\_\_\_ **Direct deposit**: Bsb: 633 000 Acct: 142172618 Please quote child's surname as reference

Credit card payment: □ **Visa** □ **Mastercard**

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

To enrol, please visit http://www.kellysports.com.au

or fill out the below enrolment form & sendwith a cheque or credit

card details to:
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**ONLINE ENROLMENT**

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