

P.O. Box 71, Moonee Vale 3055

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ST JOHN BOSCOS PRIMAY SCHOOL

DANCE FUN

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: 19/4/2017
CONCLUDING: 21/6/2017
TIME: 1:40 - 2:30pm

YEAR LEVELS: P-4

BASKETBALL

Speed, Precision, Athleticism and Fun! Our Basketball program is aimed at introducing your child to the skills and game play of this popular sports. It is designed to build and develop the motor skills balance and co – ordination used in this fast paced game. It all takes place in a fun energetic environment. .

WHEN: Monday
COMMENCING: 24/4/2017
CONCLUDING: 26/6/2017
TIME: 3:40 – 4:40pm

YEAR LEVELS: P - 4

AWESOME AUTUMN SPORTS

Don't miss out on this brilliant AUTUMN action, with our Awesome Autumn Sports. This program allows your child to experience a fun, energetic and highly active multi-sport program over 10 lively weeks! These include: Basketball, Soccer, AFL, Hockey and Crazy Games. 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: Thursday
COMMENCING: 20/4/2017
CONCLUDING: 22/6/2017
TIME: 3.40pm – 4.40pm

YEAR LEVELS: P-4

COST: \$ 120

VENUE: St John Bosco's Primary School



ONLINE ENROLMENT www.kellysports.com.au

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

or fill out the below enrolment form & send with a cheque or credit card details to:

PO BOX 71, Moonee Vale VIC 3055.

Do not leave enrolment forms at the school office.

ENROLMENT FORM

Dance Fun Basketball Awesome Autumn 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:	S	ignature:	
Amount Paid: \$ Direct deposit: Bsb	o: 633 000 Acct: 142172618	Please quote child	s surname as reference
Credit card payment:	Visa	Mastercard	
Card Number:			Evoiry Dato: