

## ST MARYS (WILLIAMSTOWN) P.S



### AWESOME AUTUMN SPORTS

#### AFL-SOCCER-BASKETBALL-HOCKEY – TEAM GAMES

Start the new school term by enrolling in this fantastic Kelly sports program. Join up with your friends and develop your skills in a fun, safe and exciting sporting environment. Our experienced coaches aim to develop and enhance the wide range of sporting skills of your child including kicking catching & throwing while also improving strength, flexibility, hand-eye co-ordination, Spatial awareness, co-operative and teamwork

**WHEN:** Wednesday  
**COMMENCING:** 02/05/18  
**CONCLUDING:** 27/6/18  
**TIME:** 3.40pm – 4.40pm  
**YEAR LEVELS:** P – 4  
**COST:** \$108



### JAZZ FUNK

Jazz – Funk gives students a chance to release energy and dance with power and passion. Our experience staff will work on a brand new routine through out the term to showcase to parents and friends. Sign up fast as students will have a fantastic time learning the new moves in our high intensity, excitement-filled dance environment.

**WHEN:** Monday  
**COMMENCING:** 24/4/18  
**CONCLUDING:** 26/6/18  
**TIME:** 3.40pm – 4.40pm  
**YEAR LEVELS:** P – 4  
**COST:** \$108  
No session June 11<sup>th</sup> Queens bday



### 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 FORM & SEND WITH A CHEQUE OR CREDIT CARDS DETAILS TO:

PO BOX 71, MOONEE VALE, 3055

PAYMENT OPTIONS AVAILABLE!

## ENROLMENT FORM

☐ Awesome Autumn Sports

☐ Jazz Funk

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 Nth West 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.