

Kelly Sports Hallam Valley

P.O. Box 332, Hampton Park VIC 3976

- T 0421 643 558
- F (03) 8786 8771
- E andyhoban@kellysports.com.au
- W www.kellysports.com.au



KILBERRY VALLEY PRIMARY



SUPER SPRING SPORTS!

DON'T MISS OUT THIS SPRING! Super Spring Sports allows your child to play a range of dynamic and active sports over the 9 week program; these include Cricket, Tennis, basketball, hockey, netball & crazy games! This multi-sport program will not only provide an essential base for your child's motor skills, but will also help build confidence and coordination, all in an enjoyable environment.

TEAM PLAYER OF THE DAY TROPHY AWARDED EACH SESSION

 WHEN:
 THURSDAYS

 COMMENCING:
 16/10/14 – 11/12/14

 PERIOD:
 9 Weeks

TIME: 3.40pm – 4.40pm

YEAR LEVELS: P-4



DYNAMIC DANCE

GET MOVING WITH KELLY DANCE THIS SPRING! Shake, move & let the beat enter your feet with Kelly Sports Dance. Our fantastic Kelly Sports Dance teachers will get your child's hips swinging, heads bumping, feet rocking & bodies shaking! From **contemporary, jazz to hip-hop and pop,** this program provides something for everyone. Our dance program will build rhythm and confidence!

WHEN: WEDNESDAYS
COMMENCING: 15/10/14 – 10/12/14
PERIOD: 9 Weeks

TIME: 3.40pm – 4.40pm

YEAR LEVELS: P-6

COST: \$10 per week (\$90 in total based on 9 x \$10 sessions)
VENUE: KILBERRY VALLEY PRIMARY SCHOOL

Please do not leave enrolment from with the school office

KELLY SPORTS IS A REGISTERED CHILD CARE PROVIDER



ONLINE ENROLMENT

www.kellysports.com.au

To enrol, please visit www.kellysports.com.au, or fill out the below enrolment form & send with a cheque or credit card details to: PO
BOX 332 Hampton Park, VIC 3696, or scan to: andyhoban@kellysports.com.au or fax to 8786 8771. Internet Direct credit available BSB: 063-616 Acct No: 10-485-344 Acct Name: Kelly Sports Hallam Valley

ENROLMENT FORM

	Sports! (After School)	Dynamic Dance!		
School:	KILBERRY VALLEY PRIMARY SCHOOL		Year Level:	
Name:			DOB:	
Addres	s:			Post Code:
Phone:		Mobile/Work:		
Email:				
Medica	l Conditions:			
	s' consent I hereby authorise Kelly Sports to E Kelly Sports Hallam Valley from any liability			
Parent/	Caregiver name:			
Signatu	ıre:	Amount Paid: \$ _		
	Card paymen	nt: Visa Mastercard		