

# ENROLMENT FORM

#### STUDENT DETAILS

First Name		Last Name	
School			
Grade		Age	
Address		Suburb	
Country	State		Post Code
Notes			
PARENT/GUARDIAN D	ETAILS		
First Name		Last Name	
Work	Home		Mobile
Phone	Phone		Phone
Email			Send KS Material

## TICK DAYS ATTENDING

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
WEEK 1	CLOSED	CLOSED			
WEEK 2		CLOSED			

### CREDIT CARD DETAILS

Card Type	Visa / Mastercard		
		Name on Card	
Credit Card No.		Signature and Date	
Expiry Date	CVV		

## **KELLY SPORTS AFTER SCHOOL / LUNCH TIME CLINICS**

Your children will have a blast whether they are grooving to the beats in one of our dance classes, working on their balance in gymnastics, scoring a goal or giving it all a go in one of our action packed and exciting multisport programmes.

For more info, go to: www.kellysports.com.au