



P.O. Box 8129 Tarneit, 3029
 T: (03) 9731 6323
 M: 0432 522 829
 E: shane@kellysports.com.au



OAK PARK PS

DANCING DYNAMOS

Over 10 weeks students will have the opportunity to move, groove, spin and slide to the sound of modern beats alongside our very experienced dance instructor. You will have a fantastic time learning the new moves in our high intensity, excitement-filled dance environment. Check out the routine on our facebook page and book early for this incredibly fun program!

WHEN Tuesday's
DATES: 18.4.17 - 27.6.17
TIME: Lunchtime
YEAR LEVELS: Grades P - 4
COST: \$120 (10 weeks)
No session Anzac Day

GAME ON!

This program is new to Kelly Sports in 2017! **Game On!** is all about getting active and moving through general game play. Young children will develop basic motor skills by playing a variety of invasion, evasion, catching, target and striking games while having a blast with their friends.

WHEN Wednesday's
DATES: 19.4.17 - 28.6.17
TIME: 3.40pm - 4.40pm
SUGGESTED GRADES: Grades P - 1
COST: \$132 (11 weeks)

AWESOME AUTUMN SPORTS

Kelly Sports is back in Term 2 for Awesome Autumn Sports!! Over 11 weeks your child will participate in range of lively and energetic programs including **AFL, Soccer & Hockey**. This program will improve key sporting skills and help give your kids a Life Long Love of Sports.

WHEN Wednesday's
DATES: 19.4.17 - 28.6.17
TIME: 3.40pm - 4.40pm
SUGGESTED GRADES: 2 - 4
COST: \$132 (11 weeks)

EARLY BIRD SPECIAL OF 10% DISCOUNT IF ENROLLED & PAID BEFORE MON 11TH APRIL



HOW TO ENROL

Simply go to www.kellysports.com.au enter your postcode and enrol from there. Alternatively you can scan and email this completed form to shane@kellysports.com.au or

ENROLMENT FORM

Dancing Dynamos

Game On!

Awesome Autumn Sports

School: _____ Year Level: _____

Name: _____

Address: _____ Post Code: _____

Phone (Mobile/Work/Home):: _____

Email: _____

Medical Conditions: _____

At the completion of after school clinics, does your child? (Please Circle) **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 from any liability for injury incurred by my child at Kelly Sports programmes.

Parent/Caregiver name: _____ Signature: _____

Amount Paid: \$ _____ Credit card payment: Visa MasterCard

Card Number: _____ Expiry Date: ____ / ____ CCV: _____