

SERPELL PRIMARY SCHOOL

DYNAMIC DANCE

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: Tuesday
COMMENCING: 2/5/2017
CONCLUDING: 27/6/2017
TIME: 12.30pm – 1.30pm
YEAR LEVELS: P – 4

GYM FUN

This fun fast paced, highly active and non-stop program is an introduction for your child to the world of gymnastics. **Colorful ribbons, Entertaining Hula Hoops, Incredible Rhythmical Routines and Group Dynamics.** Allow your child to build their gymnastics skills and their thirst for exciting energetic activities.

WHEN: Thursday
COMMENCING: 4/5/2017
CONCLUDING: 29/6/2017
TIME: 12.30pm – 1.30pm
YEAR LEVELS: P – 4

AWESOME AUTUMN SPORTS

Don't miss out on this brilliant catch! Super Summer Sports allows your child to experience a fun, energetic and highly active multi-sport program over **10 weeks** these include; **Soccer, Football, Basketball, Netball and Tee-Ball!** 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: Monday
COMMENCING: 24/4/2017
CONCLUDING: 26/6/2017
TIME: 3.40pm – 4.40pm
YEAR LEVEL: P – 4

COST: \$120 FRIDAY 14TH APRIL (go to www.kellysports.com.au and search for your school)

VENUE: Serpell Primary School



NEW IMPROVED ONLINE BOOKING SYSTEM!!!

SIMPLY GO TO 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

☐ **Dynamic Dance** (lunchtime) ☐ **Gym Fun** (Lunchtime) ☐ **Awesome Autumn Sports** (After school)

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 Templestowe from any liability for injury incurred by my child at Kelly Sports programmes.

☐ I authorise the use by Kelly Sports of any photographs or video image of my child or legal charge for any reasonable purpose.

Parent/Caregiver name: _____ Signature: _____

Amount Paid: \$ _____