



**Sign up 4 multiple  
Programs &  
Receive a  
Discount!**



# GREYTHORN PRIMARY SCHOOL



# WORLD CUP SOCCER

**GET A HEAD START!** Join me a former professional at Southampton Football club in the premier league and currently the captain of Heidelberg United in the NPL for before school soccer training, I will be working on all the skills required to become a better soccer player. First touch, passing, dribbling, shooting are just a few aspects we will be learning and putting them into match play. So hurry up to secure your place as they are limited.

**WHEN:** Tuesday  
**COMMENCING:** 21/7/15  
**CONCLUDING:** 15/9/15  
**TIME:** 3.35pm – 4.35pm  
**YEAR LEVELS:** P – 6  
**COST:** \$90



## WICKED WINTER SPORTS

## BASKETBALL - FOOTBALL - DODGEBALL – CRAZY GAMES

This program is a great way to challenge and improve your child's motor skills and coordination within a FUN environment. We aim to develop and enhance ball skills, catching, kicking, throwing, co-operative skills and teamwork while improving strength, flexibility, hand-eye co-ordination and spatial awareness. The program offers an introduction to 4 popular sports over the course of 9 weeks.

**WHEN:** Tuesday  
**COMMENCING:** 21/7/15  
**CONCLUDING:** 15/9/15  
**TIME:** 3.35pm – 4.35pm  
**YEAR LEVELS:** P – 4  
**COST:** \$90



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 2289, WATTLETREE ROAD, 3145**

## ENROLMENT FORM

☐ World Cup Soccer (after school)

☐ **Wicked Winter 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 Camberwell 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

**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.