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KEW P.S



EURO 2016 SOCCER

SOCCER CRAZY? Join me a former professional at Southampton Football club in the premier league and currently the captain of Heidelberg United in the NPL for lunchtime 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. Limited spaces so hurry up and enrol!

WHEN:

COMME

TIME:

YEAR L

WHEN: Thursday COMMENCING: 21/4/16 CONCLUDING: 23/6/16

TIME: 8.00am – 8.45am

YEAR LEVELS: P-6 COST: \$120



AWESOME SPORTS

SOCCER - RUGBY - BASKETBALL - FOOTBALL

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 10 weeks.

WHEN: Thursday
COMMENCING: 21/4/16
CONCLUDING: 23/6/16
TIME: 3.35 – 4.35pm

YEAR LEVELS: P-4 COST: \$120



MULTI MADNESS

DODGEBALL - TEEBALL - HOCKEY - HANDBALL

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 10 weeks.

WHEN: Friday
COMMENCING: 22/4/16
CONCLUDING: 24/6/16
TIME: 3.35 – 4.35pm

YEAR LEVELS: P – 4

COST: \$120



SIMPLY GO TO <u>WWW.KELLYSPORTS.COM.AU</u> 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 480, ELWOOD, 3184

ENROLMENT FORM

Euro 2016 Soccer (before school) Multi M	adness (after school) Awesome Sports (after school)
School:	Year/Class:
Name:	Birthday:
Address:	Post Code:
Phone:	Mobile:
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: CVV: