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# JUST \$10 PER WEEK

## **MITCHAM PRIMARY SCHOOL**



#### **SPECIAL SPRING SPORTS**

Soccer – Cricket – Basketball – Hockey – Crazy games Have a special time with Kelly Sports this term. Special Spring Sports dynamic and active programs run for 10 weeks this term; sports covered include soccer, basketball, cricket and hockey. This Program will not only provide an essential base for your child's motor skills but help build awareness, co-ordination and friendship all in an enjoyable environment.

#### **GYM CLUB**

BEND YOUR WAY TO GYM CLUB THIS TERM! This fast paced, highly active and nonstop program is an introduction for your child to the world of gymnastic. Colourful Ribbons, Entertaining Hula Hoops, Fantastic Rhythmical Routines and Group Dynamics allow your child to build up their thirst for energetic activities

WHEN:	Monday
COMMENCING:	10/10/16
CONCLUDING:	19/12/16
TIME:	3.20pm - 4.20pm
YEAR LEVELS:	P – 4
COST:	\$100

WHEN:	Monday
<b>COMMENCING:</b>	10/10/16
CONCLUDING:	19/12/16
TIME:	1.20pm – 2.00pm
YEAR LEVELS:	P – 4
COST:	\$100

### **END OF YEAR CHEER (NEW!!)**

IT'S THE END OF THE YEAR AND IT'S TIME TO CHEER! Join us for ou Cheerleading program for boys and girls as the kids learn weekly moves and learn a routine to perform at the end of the year. Book early for this incredibly fun program!

WHEN:	Wednesday	
Jr COMMENCING:	12/10/16	
CONCLUDING:	14/12/16	
TIME:	1.20pm - 2.00pr	
YEAR LEVELS:	P-4	
COST:	\$100	

NEW IMPROVED ONLINE BOOKING SYSTEM!!!

SIMPLY GO TO WWW.KELLYSPORTS.COM.AU ENTER YOUR POST CODE, SELECT YOUR SCHOOL AND ENROL FROM THERE.

YOU CAN ALSO COMPLETE THE ENROLMENT FORM BELOW AND RETURN TO YOUR CHILD'S COACH, OR POST TO PO BOX 5185, PINEWOOD 3149

### ENROLMENT FORM

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	
I hereby authorise Kelly Sports to act on my behalf shou any liability for injury incurred by my child at Kelly Sport I authorise the use by Kelly Sports of any photograp	ts programmes.	
Parent/Caregiver name:	Signature:	
Amount Paid: \$ Credit card payment:	Visa Mastercard CVV	