

P.O. Box 5185, Pinewood, 3149

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# **GLENDAL PRIMARY SCHOOL**

### DANCE p-1

Our specialized dance coaches can get your child's hips swinging, feet rocking and heads bumping to all of the modern music contemporary hits. Sign up fast as places are limited for our program and let our coaches beat ignite your child's feet!

WHEN: DATES: TIME: YEAR LEVELS:

COST:

Monday 7/2/22-28/3/22 1.10pm - 2.00pm

P-4 \$105

### BASKETBALL

Have fun learning how to play Basketball with your friends in the Kelly Sports Basketball Clinic. Learn all the basic skills required to play the game in a safe and challenging environment.

WHEN: **DATES:** TIME:

Tuesday 8/2/22 - 29/3/22 1.10pm - 2.00pm

P-4 YEAR LEVELS: **COST:** 

\$120

### **DANCE 2-4**

Description as per Dance p-1 at the top. This is a session designed for students in 2-4 and is more advanced.

WHEN: Thursday 10/2/22 -31/3/22 **DATES:** 1.10pm - 2.00pm

YEAR LEVELS: P-4 **COST:** \$120

## **MULTI SPORT FUN**

Soccer - Cricket - Basketball - Hockey - Crazy Games

Have a sensational time with Kelly Sports this term. Kelly Sports dynamic and active programs run throughout the term; sports covered include soccer, basketball, cricket, hockey and crazy games. This program will provide an essential base for your child's motor skills and help build awareness, co-ordination and friendship.

WHEN: **DATES:** TIME:

Tuesday 8/2/22 - 29/3/22 3.40pm - 4.40pm

YEAR LEVELS: **COST:** 

P-4 \$120

#### **ONLINE BOOKING SYSTEM!!!**

GO TO WWW.KELLYSPORTS.COM.AU ENTER YOUR POST CODE AND ENROL FROM THERE.

FILL OUT THE BELOW ENROLMENT FORM & SEND WITH A CHEQUE OR CREDIT **CARDS DETAILS TO: PO BOX 5185, PINEWOOD, 3149** 

#### **ENROLMENT FORM**

Basketball Dance p-1 Dance	ce 2-4 Multi Sport Fun
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
any liability for injury incurred by my child at Kelly Spor	uld my child require medical attention, and release Kelly Sports from ts programmes.  ohs or video image of my child or legal charge for any reasonable purpose.
Parent/Caregiver name:	Signature:
Amount Paid: \$	Credit card payment:
Card Number:	Expiry Date: CVV: