P.O. Box 5185, Pinewood, 3149
T 0437 076 897
E gary@kellysports.com.au

NEW PROGRAM FOR PREPS THURS

VERMONT PRIMARY SCHOOL

ACTIVE AUTUMN SPORTS YRS 1-4

Soccer – Basketball – Footy – Crazy games

Get active with Kelly Sports this term. Active Autumn Sports dynamic and active programs run throughout the term; sports covered include soccer, basketball, footy and crazy games. 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.

WHEN: Wednesday
COMMENCING: 26/4/17
CONCLUDING: 28/6/17
TIME: 1.10pm – 2.10pm
YEAR LEVELS: 1 – 4
COST: $120

ACTIVE AUTUMN SPORTS PREPS

Soccer – Basketball – Footy – Crazy games

DESCRIPTION OF ACTVITIES AS ABOVE

WHEN: Thursday
COMMENCING: 4/5/17
CONCLUDING: 29/6/17
TIME: 1.10pm – 2.10pm
YEAR LEVELS: PREP
COST: $108

DANCE

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: Tuesday
COMMENCING: 2/5/17
CONCLUDING: 27/6/17
TIME: 1.10 – 2.10pm
YEAR LEVELS: P – 4
COST: $108

NEW IMPROVED ONLINE BOOKING SYSTEM!!!
SIMPLY GO TO WWW.KELLYSPORTS.COM.AU ENTER YOUR POST CODE AND ENROL FROM THERE.
OR
FILL OUT THE ENROLMENT FORM BELOW & SEND WITH A CHEQUE OR CREDIT CARDS DETAILS TO:
PO BOX 5185, PINEWOOD 3149

ENROLMENT FORM

☐ **Active Autumn Sports 1-4** ☐ **Dance** ☐ **Active Autumn Sports preps**

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 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: $ _____ Credit card payment: ☐ **Visa** ☐ **Master card**

Card Number: ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ Expiry Date: ☐☐/☐☐ CVV: ☐☐☐