

E gary@kellysports.com.au

Try our new basketba session – Tuesday lunchtimes

COMMENCING: 10/10/17

CONCLUDING: 12/12/17

COMMENCING: 12/10/17

CONCLUDING: 14/12/17

COMMENCING: 10/10/17 CONCLUDING: 12/12/17

YEAR LEVELS: P-4

YEAR LEVELS: P-4

YEAR LEVELS: P-4

Tuesday

\$108

\$120

\$108

Tuesday

Thursday

1.10pm - 2.00pm

1.10pm - 2.00pm

1.10pm - 2.00pm

WHEN:

TIME:

COST:

WHEN:

TIME:

COST:

WHEN:

TIME:

COST:

GLENDAL PRIMARY SCHOOL

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.

END OF YEAR CHEER

IT'S THE END OF THE YEAR AND IT'S TIME TO CHEER! Join us for our 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!

SUPER SPRING SPORTS

Soccer – Cricket – Basketball – Hockey – Crazy Games	

Get active with Kelly Sports this term. Super Spring Sports dynamic and active programs run throughout the term; sports covered include soccer, basketball, cricket, hockey 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.

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

ENROLMENT FORM

Basketball End of Year Cheer	Super Spring Sports		
School:		Year Level:	
Name:		Room No:	
Address:		Post Code:	
Phone:	Mobile/Work:		
Email:	Medical Conditions:		
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 Spor		ease Kelly Sports from	
☐ I authorise the use by Kelly Sports of any photograp	ohs or video image of my child or legal charge	for any reasonable purpose.	
Parent/Caregiver name:	Signature:		
Amount Paid: \$	_ Credit card payment: 🗌 Visa 🔲 Mas	ter card	
Card Number:		Date:	