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VERMONT PRIMARY SCHOOL

MULTI SPORT FUN YRS 1 - 4

Soccer - Cricket - Basketball - Crazy games - Polo Hockey

Get active with Kelly Sports this term. Kelly Sports' dynamic and active programs run throughout the term; sports covered as above. 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. All sessions are run in the STADIUM.

WHEN: Wednesday COMMENCING: 1/5/19 CONCLUDING: 26/6/19

TIME: 1.10pm – 2.10pm

YEAR LEVELS: 1 – 4 **COST:** \$119

MULTI SPORT FUN PREPS ONLY

Soccer - Cricket - Basketball - Crazy games - Polo Hockey

DESCRIPTION OF ACTVITIES AS ABOVE

WHEN: Thursday COMMENCING: 2/5/19 CONCLUDING: 27/6/19

TIME: 1.10pm – 2.10pm

YEAR LEVELS: PREPS COST: \$119

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: 30/4/19
CONCLUDING: 25/6/19
TIME: 1.10 – 2.10pm

YEAR LEVELS: P-4 COST: \$119

ONLINE BOOKING SYSTEM!!!

SIMPLY GO TO <u>WWW.KELLYSPORTS.COM.AU</u> ENTER YOUR SCHOOL NAME AND ENROL OR

FILL OUT THE ENROLMENT FORM BELOW & SEND WITH A CHEQUE OR CREDIT CARD DETAILS TO:

PO BOX 5185, PINEWOOD 3149

| Multi Sport Fun 2-4 Multi Sport Fun GRADE 1 | Dance |
|---|---------------------------------------|
| 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: CVV: |