

E gary@kellysports.com.au

Get in quick to reserve your spot!

COMMENCING: 6/2/18 **CONCLUDING:** 27/3/18

YEAR LEVELS: P-4

COMMENCING: 8/2/18

TIME:

CONCLUDING: 29/3/18

WHEN:

TIME:

COST:

WHEN:

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.

DANCE

Children have the opportunity to learn a variety of modern and traditional Dance steps culminating in a routine performed in front of the class. Come and learn fun dance routines and have fun and laughter with your friends. Easy for all ages and experience to pick up from trained Kelly Sports instructors.

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 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.

YEAR LEVELS:	
COST:	\$96
WHEN:	Tuesday
COMMENCING:	6/2/18
CONCLUDING:	27/3/18
TIME:	3.40pm-4.40pm
YEAR LEVELS:	P-4
COST:	\$96

Tuesday

\$96

Thursday

1.10pm - 2.00pm

1.10pm - 2.00pm

NEW IMPRC	VED ONLI	NE BOOKII	NG SYSTEM!!

SIMPLY GO TO WWW.KELLYSPORTS.COM.AU ENTER YOUR POST CODE AND ENROL 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 Dance	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			
I hereby authorise Kelly Sports to act on my behalf should my child require medical attention, and release Kelly Sports from any liability for injury incurred by my child at Kelly Sports programmes.				
Parent/Caregiver name:	Signature:			
Amount Paid: \$	_ Credit card payment: Visa Ma	ster card		
Card Number:		Date:		