

GET IN QUICK TO ESERVE YOUR SPO

WHEN:

WHEN:

TIME:

COST:

COMMENCING: 2/5/17

COMMENCING: 20/4/17

CONCLUDING: 22/6/17

YEAR LEVELS: P-4

CONCLUDING:

GLENDAL PRIMARY SCHOOL

BADMINTON

Join the badminton crew. A great active sport that sees kids' co-ordination and fitness improve as they TIME: YEAR LEVELS: 2-6 challenge their friends. Learn to serve, smash and drop like a badminton star. Get on board! **COST:**

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.

ACTIVE AUTUMN SPORTS

Soccer – Footy – Basketball – Hockey – 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, AFL, 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.

WHEN:	Tuesday
COMMENCING:	2/5/17
CONCLUDING:	27/6/17
TIME:	3.40pm – 4.40pm
YEAR LEVELS:	P-4
COST:	\$108

Tuesday

27/6/17

\$108

\$120

Thursday

1.10pm - 2.00pm

1.10pm - 2.00pm

NEW IMPROVED ONLINE BOOKING 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

Badminton	Dance	Active Autumn Sports
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.		
Parent/Caregiver name:	Signature:	
Amount Paid: \$	Credit card payment: 🗌 Visa 🗌 Ma	ster card
Card Number:		Date: