

## GLEN WAVERLEY PRIMARY SCHOOL

### BASKETBALL

ALL AFTER  
 SCHOOL  
 PROGRAMS  
 NOW 1.5  
 HRS!!

WHEN: Monday  
 COMMENCING: 14/10/19  
 CONCLUDING: 16/12/19

TIME: 3.40pm – 5.10pm  
 YEAR LEVELS: P – 6  
 COST: \$176

### AFL

WHEN: Tuesday  
 COMMENCING: 15/10/19  
 CONCLUDING: 17/12/19

TIME: 3.40pm – 5.10pm  
 YEAR LEVELS: P – 4  
 COST: \$158

### SOCCER

WHEN: Wed  
 COMMENCING: 16/10/19  
 CONCLUDING: 18/12/19

TIME: 3.40pm – 5.10pm  
 YEAR LEVELS: P – 4  
 COST: \$176

### MULTI SPORT FUN!

Kelly Sports multi sport program runs throughout the term; sports covered include soccer, netball, hockey, bat tennis and crazy games (around 2 weeks per sport). This program will provide an essential base for your child's motor skills, help build awareness, co-ordination and friendship. A great program with lots of variety!

WHEN: Thurs  
 COMMENCING: 17/10/19  
 CONCLUDING: 19/12/19

TIME: 3.40pm – 5.10pm  
 YEAR LEVELS: P – 4  
 COST: \$176

### DANCE

WHEN: Friday  
 COMMENCING: 18/10/19  
 CONCLUDING: 20/12/19

TIME: 1.40pm – 2.30pm  
 YEAR LEVELS: P – 4  
 COST: \$132.20

#### ONLINE BOOKING SYSTEM!!!

GO TO [WWW.KELLYSPORTS.COM.AU](http://WWW.KELLYSPORTS.COM.AU) ENTER YOUR SCHOOL NAME AND ENROL FROM THERE...OR COMPLETE THE ENROLMENT FORM BELOW & RETURN TO YOUR COACH, OR SEND TO: KELLY SPORTS BLACKBURN - PO BOX 5185, PINWOOD 3149

## ENROLMENT FORM

☐ Basketball ☐ AFL ☐ Soccer ☐ Multi sport Fun! ☐ 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 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:

#### THINGS TO KNOW

Don't leave forms at the School Office  
 Spaces are limited so please make sure you enrol online or return form to Kelly Sports.