P.O. Box 71, Moonee Vale 3055
T (03) 9384 2204
F (03) 9384 2205
E sonya@kellysports.com.au

Book early to Secure your Place

ST JOHN BOSCOS PRIMAY SCHOOL

DANCE FUN

Shake, move and let the beat enter your feet with Kelly Sports. Our trained dance coaches can get your child's **hips swinging, heads bumping, feet rocking and bodies shaking** to all of modern contemporary music's classics. Sign up fast as places are limited and let our coaches beat ignite your child's dancing feet.

WHEN: Tuesday
COMMENCING: 14/7/2015
CONCLUDING: 15/9/2015
TIME: 1:40 – 2:30pm
YEAR LEVELS: P – 4

NETBALL

Speed, Precision, Athleticism and Fun! Our Basketball program is aimed at introducing your child to the skills and game play of this popular sport. It is designed to build and develop the motor skills balance and co – ordination used in this fast paced game. It all takes place in a fun energetic environment. Equipment supplied

WHEN: Tuesday
COMMENCING: 14/7/2015
CONCLUDING: 15/9/2015
TIME: 3:40 – 4:40pm
YEAR LEVELS: P - 4

WILD WINTER SPORTS

Don't miss out on this brilliant Winter action, with our Wild Winter Sports. This program allows your child to experience a fun, energetic and highly active multi-sport program over **10 lively weeks**! These include: **Basketball, Soccer, Hockey, Footy and Mini Games.** This program will not only provide an essential base for your child's motor skills but help build awareness and co-ordination all in an enjoyable environment.

WHEN: Thursday
COMMENCING: 16/7/2015
CONCLUDING: 17/9/2015
TIME: 3.40pm – 4.40pm
YEAR LEVELS: P – 4

COST: **$ 100**
VENUE: **St John Bosco's Primary School**

ONLINE ENROLMENT
www.kellysports.com.au

To enrol, please visit http://www.kellysports.com.au
or fill out the below enrolment form & send with a cheque or credit card details to:
PO BOX 71, Moonee Vale VIC 3055.
Do not leave enrolment forms at the school office.

ENROLMENT FORM

☐ **Dance Fun** ☐ **Netball** ☐ **Wild Winter 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**

Parents' consent: I hereby authorise Kelly Sports to act on my behalf should my child require medical attention, and release Kelly Sports Essendon from any liability for injury incurred by my child at Kelly Sports programmes.

Parent/Caregiver name: _____ Signature: _____

Amount Paid: $ _____ **Direct deposit**: Bsb: 633 000 Acct: 142172618 Please quote child's surname as reference

Credit card payment: ☐ **Visa** ☐ **Mastercard**

Card Number: ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ Expiry Date: ☐☐/☐☐