P.O. Box 91, Brighton SA 5048 0439 0639 16

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MULTI -SPORTS PROGRAM TERM 3 2018

WILD WINTER SPORTS BETHANY CHRISTIAN SCHOOL



WHEN: TUESDAY
COMMENCING: 31/7/18
CONCLUDING: 11/9/18

TIME: 3:20pm - 4:20pm

YEAR LEVELS: R - 2 **COST:** \$80 +*GST*

Kelly Sports is now a Sports Voucher provider.

Vaucher

Join up with your friends and develop your skills in a FUN, SAFE and exciting sporting environment.

The **Wild Winter Sports** programme allows your child to experience energetic and highly active multi-sport sessions which will challenge and improve your child's motor and coordination skills.

The Wild Winter Sports programme includes FOOTBALL, SOCCER, BASKETBALL, NETBALL

Our experienced coaches aim to develop and enhance the wide range of sporting skills of your child including kicking, catching & throwing while also improving strength, flexibility, hand-eye co-ordination, spatial awareness, co-operative skills and teamwork.

A Kelly Sports coach will be responsible for your child during this activity and a registration form and payment is required before your child participates in activities with us.

VENUE: Bethany Christian School

Meeting Place: Under the Verandah on Main Oval



ONLINE ENROLMENT

www.kellysports.com.au

To enrol, visit www.kellysports.com.au or fill out the enrolment form below and send it with a cheque to PO BOX 91 Brighton SA 5048 payable to Twin Sports Pty Ltd T/As Kelly Sports Adelaide Metro

To download your voucher for Sports Voucher please visit www.sportsvouchers.sa.gov.au and forward to Kelly Sports with your registration form. A discount of \$50 will be deducted from your Kelly Sports fees ad an invoice will then be issued for the payment of the remaining balance.

Internet Banking: BSB 035 045 A/C No 342581

ENROLMENT FORM

| School: | Year Level: | |
|---|---|----------|
| Name: | | |
| Address: | Post Code | |
| Phone: | Mobile/Work: | |
| Email: | | |
| Medical Conditions: | | |
| At the completion of the Kelly Sports clinics, does y | your child? GO TO AFTER CARE □ GET COL | LECTED □ |
| | t on my behalf should my child require medical attention, y liability for injury incurred by my child at Kelly Sports pr | |
| Parent/Caregiver name: | Signature: | |
| Amount Paid: \$ | by Cash / Cheque / Internet transfer (date) | |
| | | |

Statement of commitment to child safety



Kelly Sports is a learning destination for the Children's University



All children who come to Kelly Sports have a right to feel and be safe. The welfare of the children in our care will always be our first priority and we have a zero tolerance to child abuse. We aim to create a child safe and child friendly environment where children feel safe and have fun. This policy was developed in collaboration with all our staff, volunteers and the children who use our services and their parents. It applies to all staff, volunteers, children and individuals involved in our organisation.