3/294 Police Road, Noble Park North
T 0418 585 227
E angela@kellysports.com.au
Phone 0418 585 227

SIGN UP BEFORE April 13th and only pay $108

ST PETERS PRIMARY SCHOOL

AUTUMN AWESOME SPORTS

SOCCER – BASKETBALL- AFL- HOCKEY – CRAZY GAMES

This program is a fantastic way to challenge and improve your child's motor and coordination skills. Our experienced coaches aim to develop and enhance the wide range of sporting skills of your child, including catching, kicking & throwing. While also improving strength, flexibility, hand-eye co-ordination, spatial awareness, co-operative skills and teamwork, all within a FUN and very SAFE environment.

WHEN: TUESDAY
COMMENCING: 24/4/18
CONCLUDING: 26/06/18
TIME: 3.35pm – 4.35pm
YEAR LEVELS: P – 6
COST: $120

HIP HOP STREET DANCE

Breaking, Popping and Locking!! Our specialized Dance coaches can get your child's hips swinging, feet rocking and heads bumping to the original street dancing. Street dance is a FUSION of styles that you child can enjoy dancing out to!!!! Sign up fast as places are limited for our program and let our coaches beat, ignite your child's feet!

WHEN: Tuesday
COMMENCING: 24/4/18
CONCLUDING: 26/6/18
TIME: 11am – 11.40am
YEAR LEVELS: P – 6
COST: $120

GET IN QUICK FOR TERM 2 AS PLACES FILLING FAST

$120 FOR 10 WEEK PROGRAM

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:

3/294 POLICE ROAD, NOBLE PARK NORTH. 3174

PAYMENT OPTIONS AVAILABLE!

ENROLMENT FORM

☐ **Wacky Winter Sports** ☐ **Street 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**

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

Parent/Caregiver name: _____ Signature: _____

Amount Paid: $ _____ Credit card payment: ☐ **Visa** ☐ **Master card**

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

THINGS TO KNOW

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