P.O. BOX 71, MOONEE VALE, VIC, 3055

T (03) 9384 2204 F (03) 9384 2205

E info@kellysports.com.au

HURRY UP AND ENROL ONLINE!

GLEN IRIS PS

BRILLIANT BALLSPORTS

This exciting **10 week** program includes Basketball or Netball, Soccer, AFL Footy, Hockey or T-Ball. Boys & Girls of all abilities welcome.

Our program is a fantastic way for your child to develop key sporting skills essential for all sports. It will inspire children to give sport a go as they develop their catching, throwing, kicking, striking, running and jumping skills. Our modified sports games provide lots of fun while skills are being developed.

WHEN: Wednesday
COMMENCING: 22 April '15
CONCLUDING: 24 June '15
TIME: 3.35pm – 4.35pm
YEAR LEVELS: P – 4

BASKETBALL, FOOTY & SOCCER

We provide a range of dynamic activities over 10 weeks. 3 weeks each of Basketball and Soccer plus AFL Footy and Netball. Boys & Girls of all abilities welcome.
Our talented qualified and enthusiastic coaches will have your children kicking and shooting goals, developing skills in passing, dribbling, heading and helping their team to glory.

WHEN: Thursday
COMMENCING: 23 April '15
CONCLUDING: 25 June '15
TIME: 3.35pm – 4.35pm
YEAR LEVELS: P– 4

COST: **$100** ($10 p/wk) **each. Enrol online** – go to **www.kellysports.com.au**

VENUE: **At School.** *Meet at the Rotunda.*

ONLINE ENROLMENT
www.kellysports.com.au

To enrol, please visit **www.kellysports.com.au** or fill out the enrolment form below & send with a cheque or credit card details or pay by internet banking:
ANZ Bsb 013 030 A/c 4936 95452 (use child's first, last name as reference)
Mail to: **PO BOX 71, Moonee Vale, VIC 3055**. Email **info@kellysports.com.au**
Do not leave enrolment forms at the school office.

ENROLMENT FORM

☐ **Brilliant Ballsports** (After School) ☐ **Basketball, Footy & Soccer** (After School)

School: Glen Iris PS_____ Year Level: _____
Name: _____ Room No: _____
Address: _____ Post Code: _____
Phone: _____ Mobile/Work: _____
Email: _____ Medical Conditions / Special Needs: _____

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 Burwood 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** ☐ **Mastercard** **CVV** ☐☐☐

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