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!

GLEN IRIS PS

Early Bird rate $9.50 / week, if you enrol by Friday 26th Sept.

SENSATIONAL SPRING SPORTS

This 10 week program includes Basketball or Netball, "World Cup" Soccer and Cricket, 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: 15 October '14
CONCLUDING: 17 December '14
TIME: 3.35pm – 4.35pm
YEAR LEVELS: P – 4

BASKETBALL, CRICKET & SOCCER

We provide a range of dynamic activities over 10 weeks. 3 weeks each of Basketball and "World Cup" Cricket and 4 weeks of Soccer. Boys & Girls of all abilities welcome. Our talented qualified and enthusiastic coaches will have your children kicking goals or hitting 4s in no time, developing skills in passing, dribbling, heading and of course kicking or hitting or bowling their team to glory.

WHEN: Thursday
COMMENCING: 9 October '14
CONCLUDING: 11 December '14
TIME: 3.35pm – 4.35pm
YEAR LEVELS: P – 4

COST: **$100 each. Enrol online** – go to **www.kellysports.com.au**
Early bird rate of **$95, if you enrol online by Friday 26th September.**

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

☐ **Sensational Spring Sports** (After School) ☐ **Basketball, "World Cup" Cricket & 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: ☐☐/☐☐