WILD WINTER SPORTS

Don’t miss out on this brilliant Winter action, with our Wild Winter Sports. This programme allows your child to experience a fun, energetic and highly active multi-sport program over 10 lively weeks! These include: Basketball, Soccer, Touch Rugby, Footy and Crazy 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.

VENUE: Williamstown North Primary School
COST: $100

WHEN: Monday
COMMENCING: 15/7/2013
CONCLUDING: 16/9/2013
TIME: 3:40pm – 4:40pm
YEAR LEVELS: P – 4

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

VENUE: Williamstown North Primary School
COST: $100

WHEN: Wednesday
COMMENCING: 17/7/2013
CONCLUDING: 18/9/2013
TIME: 1:00pm – 2:00pm
YEAR LEVELS: P – 4

ONLINE ENROLMENT
www.kellysports.com.au

To enrol, please visit http://www.kellysports.com.au/zone/essendon 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

- Wild Winter Sports
- Dance Fun (Lunch time)

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: $ __________ Credit card payment: □ Visa □ Mastercard

Card Number: ____________ ____________ ____________ ____________
Expiry Date: ____________ / ____________