### Glen Iris Primary

#### SUPER SUMMER SPORTS  Thursday after school
- **COMMENCING:** 11/02/2010
- **CONCLUDING:** 25/03/2010
- **TIME:** 3.35 – 4.35 p.m.
- **YEAR LEVELS:** 1 – 4
- **VENUE:** Meet at the Rotunda

Goal scoring Hockey, big hit Cricket, fast pass Basketball and Crazy Games make Kelly Sports Program the place to be. Develop your child’s motor skills and help build awareness & co-ordination, all in an enjoyable environment. Boys & Girls of all abilities.

#### DYNAMIC DANCE  Thursday lunchtimes
- **COMMENCING:** 11/02/2010
- **CONCLUDING:** 25/03/2010
- **TIME:** CANCELLED
- **YEAR LEVELS:**
- **VENUE:** Meet at Multi Purpose room

#### BASKETBALL & NETBALL FUN!  Friday after school
- **COMMENCING:** 12/02/2010
- **CONCLUDING:** 26/03/2010
- **TIME:** 3.35 – 4.35 p.m.
- **YEAR LEVELS:** 1 – 4
- **VENUE:** Meet at the Rotunda

Enjoy BASKETBALL & NETBALL fun with THREE weeks of each sport playing enjoyable activities plus a week of crazy games. Learn & develop your skills in a fun and exciting sporting environment.

#### COST:
- **$70 each** for our 7 week program
- *(Early bird rate of $67 for enrolments prior to Wednesday 23/12/09)*

To enrol, please fill out the enrolment form & send with a cheque or credit card details or pay by Internet Banking: ANZ Bab 013030 A/c 4936 95482 (please use your child’s first, last name & school as reference). Mail to: Kelly Sports BURWOOD, P.O.BOX 254, Bentleigh, VIC 3204

Enrolment forms will not be processed without payment. Please do not leave Enrolment forms at the school office.

---

### Glen Iris PS ENROLMENT FORM

**Kelly Sports is a Registered Child Care provider.**

Super Summer Sports  □  Basketball & Netball Fun  □

- **School:** PLEASE PRINT.......................................................................................................................................................... Year Level : ........................................
- **Name(s):**..............................................................................................................................................................................................................
- **Address:** ........................................................................................................................................................................................................
- **Post Code :** ................................................................................................................................................................................................
- **Phone :** (Home) ...................................................... (Mobile / Work) ........................................
- **Email Address :** .............................................................. Kelly Sports receipts will be emailed.
- **Medical Conditions :** ................................................................................................................................................................................................

At the completion of after school clinic, does your child?  
- **GO TO AFTER CARE □**  
- **GET COLLECTED □**

Parents consent: I hereby authorize 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 programs.

- **Parent Name :** ................................................................................................................................................................................................
- **Parent Signature :** ................................................................................................................................................................................................
- **Credit card payment :** (Please tick)  
  - **Visa □**  
  - **Mastercard □**  
- **Card Number :** ____________ ____________ ____________ ____________  
  - **Expiry Date :** _____ / _____
- **Card Holder’s Name :** ................................................................................................................................................................................................
  - **Amount $ :** ................................................................................................................................................................................................