BEAUMARIS PS

GYMNASTICS
Students learn a range of activities such as juggling, coordination, acrobatics and tumbling by our Level 1 certified coaches.

WHEN: Monday
COMMENCING: 3/2/14
CONCLUDING: 31/3/14
TIME: 3.35.4.35
YEAR LEVELS: P – 4

SUPER SOCCER
Play Soccer with your friends in the Kelly Sports Soccer Clinic. Now with 2 levels of coaching. Beginners (prep-1) and Soccer Squad (y 2+)

WHEN: Friday
COMMENCING: 7/2/14
CONCLUDING: 4/4/14
TIME: 3.35.4.35
YEAR LEVELS: 1-6

GYMNASICS $125  Soccer $105  (early bird rate $120 & $100 if paid before 2/2/14)
go to \url{http://kellysports.com.au/zone/sandringham} and search for Beaumaris

VENUE: Calisthenics: Hall  Soccer: Oval

COST: Gymnastics $125  Soccer $105  (early bird rate $120 & $100 if paid before 2/2/14)
go to \url{http://kellysports.com.au/zone/sandringham} and search for Beaumaris

TO ENROL, PLEASE VISIT \url{http://kellysports.com.au/zone/sandringham} OR FILL OUT THE ENROLMENT FORM & SEND WITH A CHEQUE OR CREDIT CARD DETAILS TO:
P.O. Box 183, Black Rock 3193

Do not leave enrolment forms at the school office.

ENROLMENT FORM

\begin{itemize}
\item [\square] Calisthenics  \item [\square] Soccer
\end{itemize}

\begin{itemize}
\item School: \\
\item Name: \\
\item Address: \\
\item Phone: \\
\item Mobile/Work: \\
\item Email: \\
\item Medical Conditions: \\
\item Year Level: \\
\item Room No: \\
\item Post Code: \\
\item At the completion of after school clinics, does your child? [ ] Go to after care [ ] get collected
\end{itemize}

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

\begin{itemize}
\item Parent/Caregiver name: \\
\item Signature: \\
\item Amount Paid: $ \\
\item Credit card payment: [ ] Visa [ ] MasterCard
\end{itemize}

\begin{itemize}
\item Card Number: \\
\item Expiry Date: \\
\end{itemize}