



AT ST ANDREWS ON MONDAY LUNCHTIMES TERM 3 2011

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www.kellysports.co.nz

WHEN: Mondays
COMMENCING: 08/08/2011
CONCLUDING: 26/09/2011
TIME: 12:45PM – 1:30PM
YEAR LEVELS: 4 – 6



KELLY DANCE CLUB

HAVE FUN - LEARN SKILLS - MAKE NEW FRIENDS

Sessions include songs and routines that your children will love plus a number of modified games and activities.....

RIHANNA - MICHAEL JACKSON - J. WILLIAMS - BLACK EYED PEAS
AND MUCH MORE. STARTS WEEK TWO OF TERM 3 2011

- 1,2,3 Cha Cha Cha. Find out why dance is fast becoming one of the most popular pastimes in this country as you twirl and twist your way through a range of fun and exciting dance activities.
- Let Kelly Sports improve your understanding of important dance concepts and ignite your passion for dance as you progress from basic to more advanced moves.
- Take the skills learnt in term 2 and continue to improve your dancing skills.
- PERFORMER OF THE DAY CERTIFICATE AWARDED EVERY SESSION
- CERTIFICATES AWARDED AT THE END OF THE TERM

**KELLY SPORTS
OFFERS**
Holiday Programs
Sports Days at Schools
In-curriculum Programs
For more info visit our
website
www.kellysports.co.nz

WHY NOT HAVE A KELLY SPORTS BIRTHDAY PARTY?

- Have a coach from Kelly Sports come out and run your birthday party.
- Fantastic fun for the kids. Stress free for the parents.
- Choose from Soccer, Hockey, Netball, Basketball, Touch and more.

COST: \$75 for 8-week programme.

PLEASE NOTE: Programme places are limited so please enrol as soon as possible to avoid disappointment.

VENUE: ST ANDREWS PREPARATORY SCHOOL MEETING PLACE: Outside Prep School Office

To enrol, please fill out the enrolment form & send with a cheque or pay by internet banking:
Kelly Sports Christchurch, PO BOX 37296, Halswell, Christchurch
Internet Banking: 03-1584-0110207-000 (please include your child's first & last name as a reference)
Enrolment forms will not be processed without payment. Do not leave enrolment forms at the school office.

KELLY SPORTS ENROLMENT FORM – ST ANDREWS

www.kellysports.co.nz

School: ST ANDREWS PREPARATORY SCHOOL Year Level: _____

Name: _____ Room Number: _____

Address: _____

Phone: (Home) _____ (Mobile / Work) _____

Email: _____ Medical Conditions: _____

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

Parent/Caregiver Name: _____ Parent/Caregiver Signature: _____

Amount Paid: \$ _____ by internet/cheque/cash (please circle) Date Paid (if internet): _____