

Camp Lanark

Child's Name: _____ Parent Handbook Received? Y / N
Household #: _____ Grade: _____ Group: _____

Registration Application/Worksheet

Initial Payment Record (Staff)

Weekly Rates & Fees

No Registration Fee (each camper will receive 1 camp shirt & 1 rash guard)

\$30.00 Weekly Camp Fee

\$10.00 Additional Camp Shirt

\$10.00 Late Pick up Fee

Activities and trips are subject to change/cancellation without prior notice

\$30.00	X____ Weekly Fee	\$
\$10.00	X____ Additional Shirts	\$
	Total Received	\$
	RR#	
	Initial Payment Date	/ /
	Staff Name (initial)	
Yes / No	T-Shirts Received?	Qty_____

•\$30.00 weekly fee is **Non-Refundable/Non-Transferrable**. Weekly camp enrollment is on a first come, first serve basis.

This summer camp program is subsidized by the City of Los Angeles.

	<u>MON</u>	<u>TUES</u>	<u>WED</u>	<u>THUR</u>	<u>FRI</u>	Weekly Fee	Other	RR#	Date
1	June 13	June 14	Aquarium & Bubba Gump	June 16	June 17				
2	June 20	June 21	California Science Center	June 23	June 24				
3	June 27	June 38	Medieval Times	June 30	July 1				
4	July 4	July 5	Splash	July 7	July 8				
5	July 11	July 12	John's Incredible Pizza	July 14	July 15				
6	July 18	July 19	Knott's Soak City	LA Sparks	July 22				
7	July 25	July 26	Universal IMAX & iFly	July 28	July 29				
8	August 1	August 2	Knott's Berry Farm	August 4	August 5				
9	August 8	August 9	Oak Creek Corral	August 11	August 12				

PLEASE INITIAL BELOW. I have read and understand the following:

_____ T-shirts are required to worn daily. If your child arrives to camp without a t-shirt, one will be issued to them and you will be billed accordingly (\$10.00).

_____ **Your child is not guaranteed enrollment unless fees are paid in full, in advance. Enrollment in camp is on a first come, first serve basis.**

_____ A \$10.00 late fee will apply to any child picked up after 6:00pm.

_____ All registration and weekly fees are Non-Refundable and Non-Transferable.

_____ Any refunds (if applicable) will be accessed a 15% administration fee in addition to the non-refundable registration fees.

Registration Form **Camp Lanark**

Child's Gender: (please circle) Male / Female

Grade in Fall: _____

School: _____

Child's Name: _____

Age: _____

Birth Date: ____/____/____

Address: _____

City: _____

State: _____ Zip Code: _____

Parent's (Guardian's) Name: _____

Relation to Child: _____

Primary #: () _____ Secondary #: () _____ E-mail: _____

Parent's (Guardian's) Name: _____

Relation to Child: _____

Primary #: () _____ Secondary #: () _____ E-mail: _____

I authorize **ONLY** these additional persons to pick up my child (*include car pools*) and to be contacted in case of an emergency:

Name: _____ Relation: _____ Phone: () _____

Name: _____ Relation: _____ Phone: () _____

Name: _____ Relation: _____ Phone: () _____

Name: _____ Relation: _____ Phone: () _____

****Person's listed below ARE NOT authorized to pick up my child at any time.**

****Please Note:** If named person is a biological parent, written documentation by the court is required.

Name: _____ Relation: _____

Name: _____ Relation: _____

MEDICAL INFORMATION: Insurance Provider: _____ Policy #: _____

Physician: _____ Phone: () _____ Dentist: _____ Phone: () _____

Is child on medication? Yes ____ No ____ If so, what kind: _____

Amount: _____ Frequency: _____

Reason for limitations of physical activities, if any: _____

List any illnesses, allergies, medical conditions, food restrictions or behaviors that we should be aware of in case of a major emergency:

List anything you would like to tell us about your child: _____

PLEASE READ THOROUGHLY AND SIGN IN THE PERTINENT PLACES. CAMPERS WILL NOT BE PERMITTED TO PARTICIPATE IN ANY CAMP LANARK PROGRAMS UNLESS THIS FORM IS FILLED OUT CORRECTLY AND SIGNED.

AUTHORIZATION TO PARTICIPATE

My child, (print name) _____, a minor has my authorization to participate in Camp Lanark Day Camp Program and all activities therein (including chartered bus trips). I further agree to relieve the City of Los Angeles, Department of Recreation and Parks, its officers, agents, and employees from any liability for injury to my child resulting from and/or in connection with activities in this program. I, the undersigned, as parent/guardian of the above mentioned minor do hereby authorize the City of Los Angeles to act as agent for the undersigned; to consent for any X-Ray examination, anesthetic, medical, or surgical diagnosis, treatment/hospital care which is deemed advisable by, and is to be rendered under the general or special supervision of any physician and/or surgeon licensed under the provisions of the Medicine Practice Act and on the medical staff of a licensed hospital; whether such diagnosis or treatment is rendered at the office of said physician or at said hospital. This authorization is given in advance of any specific diagnosis/treatment, etc., and is given to provide authority to aforesaid agents to give specific consent. This authorization is given pursuant to the provisions of Section 25.8 of the Civil Code of California.

GENERAL POLICIES

1) Neither the Department of Recreation and Parks nor the Day Camp carries insurance. 2) Refunds may be issued for long-term illnesses only (5 consecutive day camp days or more), provided that we received a signed note from a licensed physician within 3 days after illness. A 15% processing fee will apply to all refunds in addition to all other non-refundable fees. Allow 8-12 weeks for processing of refunds. 3) All camp registration fees are absolutely non-refundable, NO EXCEPTIONS. 4) Tuition must be paid in full in order to reserve the weeks you wish your child to attend. Weekly camp enrollment is on a first come, first serve basis. 5) Only the parents and authorized individuals listed on the child's application will be allowed to sign out the child. When picking up the child ALL authorized individuals will be required to present a picture I.D. at any time staff requests it, NO EXCEPTIONS. Written permission must be provided by the parent/guardian if you wish your child to be released to anyone other than those authorized on the registration form. 6) For safety purposes, camp t-shirt and tennis shoes must be worn daily, NO EXCEPTIONS. Children attending camp without a camp shirt will be issued one and you will be billed accordingly. Campers are responsible for providing and applying their own sun block as necessary. Staff WILL NOT be held responsible for providing, applying, or having to remind campers to apply sun block. 7) Although parents are welcome to drop in and observe the camp program, for the safety and happiness of the children and staff, parents are not permitted to linger in or around the program for extended periods of time. 8) Parents are not permitted to accompany children on any day camp field trips. 9) Staff reserves the right to change or alter programming at any time without notice. 10) All cell phones, personal toys, games and other items are NOT permitted at camp. Camp Lanark, the staff, and the City of Los Angeles, Department of Recreation and Parks are not responsible for any broken, lost or stolen items/articles. 11) Camp Lanark hours are from 7:30am-6:00pm. If your child is not picked up by 6:00pm a \$10.00 late pick up fee will be assessed, over and above all fees. 12) All activities, other than scheduled field trips will occur at Lanark Recreation Center.

I have read and understand the AUTHORIZATION TO PARTICIPATE and GENERAL POLICIES. I hereby agree to abide by all the above-mentioned policies and practices and further understand that transgression of any policy is cause for immediate expulsion from the program without refund.

Parent/Guardian (Signature)

Parent/Guardian (Print Name)

Date



City of Los Angeles Department of Recreation and Parks



Lanark Recreation Center

21816 Lanark St. Canoga Park, CA 91304 * Phone: (818) 883-1503

Camp Registration Agreement Form

Please complete and return form to the Camp Office with your child's registration application.

Your child may not begin camp until this form is signed and turned in.

(office use only)

Child # 1: Name _____ Grade in Fall _____ Group Color _____

Child # 2: Name _____ Grade in Fall _____ Group Color _____

Child # 3: Name _____ Grade in Fall _____ Group Color _____

Child # 4: Name _____ Grade in Fall _____ Group Color _____

Photo/Video Release

I hereby give the City of Los Angeles Department of Recreation and Parks, it's agents, and assigned representatives permission to photograph and/or video tape my above named minor child(ren). I understand the sole purpose of these photographs and/or videos is for the promotion, publication, advertisement, and exhibition of services, programs, and/or events offered by the City of Los Angeles, Department of Recreation and Parks via any City of Los Angeles platforms (audio, film, internet, print and/or social media).

Parent / Guardian Signature

Parent Handbook Agreement

With my signature I, _____, hereby acknowledge that I have received, read, and understand all Camp Lanark rules, policies, and procedures stated in the Parent Handbook and the Registration Application/Booklet. I understand and agree to review this information with my child(ren) and any other persons associated with my child(ren) during the period of care with Camp Lanark. I further understand that failure to comply with any part of Camp Lanark rules, policies, and procedures will result in my child's dismissal from the program.

City of Los Angeles
Department of Recreation and Parks
COVID-19 Acceptance of Risk and Waiver of Liability

By my participation, I am fully aware that there are a number of risks associated with me and/or my child entering onto City of Los Angeles Department of Recreation and Parks (RAP) property, participating in RAP programs, and utilizing RAP equipment and facilities during the COVID-19 pandemic. This waiver, release, and other representations and covenants set forth herein are given in consideration for RAP permitting me and/or my child to participate in RAP programs during this emergency period.

Therefore, without limitation, I understand that I and/or my child could contract COVID-19 disease which could result in a serious medical condition requiring medical treatment in a hospital or could possibly lead to death.

On behalf of myself and/or my child and our heirs, successors and assigns, I knowingly and freely, assume all such COVID-19 related risks, both known and unknown, relating to my and/or my child's entry onto RAP property, participation in RAP programs, and utilization of RAP equipment and facilities as described above, and I hereby forever release, waive, relinquish, and discharge RAP, along with its officers, agents, employees, or other representatives, and their successors and assigns (collectively, the "**City Representatives**"), from any and all COVID-19 related claims, demands, liabilities, rights, damages, expenses, and causes of action of whatever kind or nature, and other losses of any kind, whether known or unknown, foreseen or unforeseen, (collectively, "**Damages**") as a result of me and/or my child entering onto RAP property, participating in RAP programs, and utilizing RAP equipment and facilities as described above, including but not limited to personal injuries, death, disease or property losses, or any other loss, and including but not limited to claims based on the alleged negligence of any City Representative or any other person related to COVID-19 sanitization. I further promise not to sue RAP or any City Representative, and agree to indemnify and hold them harmless from any and all Damages resulting from me and/or my child's contraction of COVID-19.

Participant's Full Name: _____

Parent/Guardian's Full Name: _____

Parent/Guardian's Signature: _____

Today's Date: _____