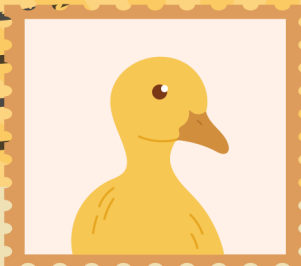


RESEDA PARK SUMMER CAMP

JUNE 17 - August 9



**FUN & CREATIVE
ACTIVITIES FOR
YOUTH
AGES 5-13**

RESEDA PARK SUMMER CAMP

Weekly Fee:
\$80
**one time
REGISTRATION Fee:**
\$25
**includes 2
CAMP SHIRTS!**

**DISCOUNTS
AVAILABLE SEE
PARK DIRECTOR
FOR MORE
DETAILS**

**JUNE 17TH -
AUGUST 9TH
MONDAY-FRIDAY
8:00AM-6:00PM**

FOR MORE INFO:

**(818)881-3882
WWW.LAPARKS.ORG
/RECCENTER
/RESEDA**

**REGISTER ONLINE:
APRIL 22 @9AM**

SPACE IS LIMITED

WEEK 1

JUNE 17-21

OUTER SPACE!

THURSDAY, JUNE 20 -

**4 DAY
CAMP**

SCIENCE CENTER!

NO CAMP JUNE 19TH

WEEK 2

JUNE 24-28

GAME ON!

THURSDAY, JUNE 27 -

ULTRAZONE!

WEEK 3

JULY 1-5

SUPERHEROES!

WEDNESDAY, JULY 3RD -

SIX FLAGS!

**4 DAY
CAMP**

NO CAMP JULY 4TH

WEEK 4

JULY 8-12

SURFS UP!

THURSDAY, JULY 11TH -

SOAK CITY!

WEEK 5

JULY 15-19

FUN IN THE SUN!

THURSDAY, JULY 18TH -

**UNDERWOOD FAMILY
FARMS!**

WEEK 6

JULY 22-26

OLYMPICS!

THURSDAY, JULY 25TH -

PACIFIC PARK!

WEEK 7

JULY 29-AUGUST 2

WILD WILD WEST!

THURSDAY, AUGUST 1ST -

KNOTT'S BERRY FARM!

WEEK 8

AUGUST 5-9

GOODBYE SUMMER!

THURSDAY, AUGUST 8TH -

RAGING WATERS!

****All Information On This Flyer Is Subject To Change Or Cancellation****

**Persons With Disabilities Are Welcome To Participate In Our Programs. Reasonable Accommodations Can Be Made With Prior Arrangement.
"Achieving Gender Equity Through A Continuous Commitment To Girls And Women In Sports."**

Sportmanship Is Everyone's Responsibility.

**ACTIVIDADES
DIVERTIDAS Y
CREATIVAS PARA
JÓVENES DE 5-13
AÑOS**

Reseda PARK

CAMPAMENTO de VERANO

**PRECIO DE
semana:**
\$80
PRECIO DE INSCRIPCIÓN:
\$25
**incluye 2 CAMISAS
de CAMPAMENTO!**

**DESCUENTOS
DISPONIBLES
CONSULTE AL
DIRECTOR DEL
PARQUE PARA
OBTENER MÁS
DETALLES**

**17 DE JUNIO -
9 DE AGOSTO
Lunes-viernes
8:00AM-6:00PM**

PARA MAS INFORMACIÓN:
(818)881-3882
WWW.LAPARKS.ORG
/RECCENTER
/RESEDA

**REGISTRO EN LÍNEA:
APRIL 22 @9AM**

ESPACIOS LIMITADOS

SEMANA 1

**17 de JUNIO-21
ESPACIO SIDERAL!**

JUEVES 20 de JUNIO

**CAMP
4 DIAS - SCIENCE CENTER!**

***NO CAMPAMENTO
19 de JUNIO***

SEMANA 2

JUNE 24-28

JUEGO ENCENDIDO!

JUEVES 27 DE JUNIO -

ULTRAZONE!

SEMANA 3

**1 JULIO-5
SUPERHÉROES!**

MIÉRCOLES, 3 DE JULIO -

**CAMP
4 DIAS *NO CAMPAMENTO 4
de JULIO***

SIX FLAGS!

de JULIO*

SEMANA 4

8 DE JULIO-12

SURFEA!

JUEVES 11 DE JULIO -

SOAK CITY!

SEMANA 5

15 DE JULIO-19

DIVERTIDO AL SOL!

JUEVES 18 DE JULIO -

**UNDERWOOD FAMILY
FARMS!**

SEMANA 6

22 DE JULIO-26

JUEGOS OLIMPICOS!

JUEVES, 25 DE JULIO -

PACIFIC PARK!

SEMANA 7

29 DE JULIO-

2 DE AGOSTO

SALVAJE OESTE!

JUEVES 1 DE AGOSTO -

KNOTTS BERRY FARM!

SEMANA 8

5 DE AGOSTO-9

ADIOS VERANO!

JUEVES 8 DE AGOSTO -

RAGING WATERS!

****Todo la información en este folleto esta sujeta a cambios o cancelacion****

Las personas con discapacidades pueden participar en nuestras clases y programas. Se pueden hacer adaptaciones razonables con acuredo previo.
"Lograr la equidad de género a través de un compromiso continuo con las niñas y mujeres en el deporte".

El espíritu deportivo es responsabilidad de todos.

Camp Rules & Operations:

Field Trip Days:

Our weekly newsletter will have dates and times information for trips. Trips take place on Thursdays, except week 3, July 1-5th, which takes place on Wednesday.

Please allot extra time on field trip day for drop offs and pick ups!

Campers must arrive on time for field trip days. If a camper misses the bus, there is no camp staff at the park on field trip days.

Parents must arrange alternative arrangements for campers choosing to not go to trips/miss the bus.

Swim Time:

Only campers 7 and older will be able to go swimming at the reseda pool! Campers stay in the shallow end which is about 4 and 1/2 feet deep, in order to go to the deep end campers must pass the swim test with the lifeguards at the pool.

If a camper is feeling under the weather, we ask they stay home and get better! If a camper begins to feel unwell at camp, a parent/guardian/authorized individual will be called to pick up camper from camp.

Camp Hours:

Operational hours are from 8am-6pm. Group Activities begin at 9am and end at 4pm. 4pm-6pm is supervised play. Campers are to be picked up no later than 6pm.

Camp Attire:

Campers must wear their camp t-shirt everyday, dress comfortably, and in closed toe shoes.

Sign in & Out:

For the safety of our campers, campers must be signed in and out daily. Only Parents and Authorized Individuals listed on the campers registration form will be allowed to sign out that child. Individuals may be asked to show photo I.D.

Please allot extra time for first week of drop off and pick up! We will be handing out camp shirts and getting to know you and your camper(s) the first week!

Lunch & Snack:

Campers may grab a lunch with us through LAUSD or bring their own lunch. LAUSD monthly lunch calendars will be sent out to parents, make sure to take a look at the menu!

Campers will be given a daily snack after swim time! Campers are encouraged to pack sufficient snacks for throughout the day, as campers tend to get hungry throughout the day!

Things Campers Should Bring:

Campers should bring with them a refillable water bottle, sunscreen, hat, swimsuit, towel, and extra snacks! All campers belongings must be labeled.

Reseda Recreation Center/Staff are not responsible for stolen, lost, or damaged items.



Disciplinary Rules & Actions

COOL
TO BE
KIND

TAKE
IT
EASY

CAMP RULES:

Be kind!

Hands to yourself!

Follow directions from Camp Counselors and CIT's!

Play fairly!

Be considerate!

Use appropriate language!

Do not take what does not belong to you!

Share!

Respect Camp Staff!

Try new things!

REMEMBER TO
HAVE FUN!



Review these rules with your camper(s) before coming to camp, and continue to do so throughout the summer, to ensure everyone has a happy, safe, and fun time!

Behavioral Guidelines:

Step 1:

Redirection of camper. Staff will redirect camper away from potentially inappropriate behaviors.

Step 2:

Conversation with camper. Staff will speak to camper about any rules broken, discuss appropriate behaviors, and problem solve together. Staff may speak to parent(s) as well.

Step 3:

Notice will be sent home. In the event, the steps above do not solve the conflict, staff will send a note (Sad Gram) to parents.

Step 4:

Suspension from camp. If a camper is to receive 2 notes home, suspension from camp will take place. Amount of time of suspension depends on severity of problem.

Step 5:

Expulsion from camp. If campers behavior continues after suspension, expulsion from camp can take place.

**FOR AGES
14-15**

**MUST INTERVIEW
& BE ACCEPTED TO
THE PROGRAM
BEFORE
REGISTERING!**

C.I.T

Counselor in Training Program

**Weekly
Fee:
\$40**

**one time
REGISTRATION Fee:
\$25
INCLUDES C.I.T
SHIRT!**

**JUNE 17TH-
AUGUST 9TH
8AM-6PM**

**CALLING ALL TEENS
AGES 14-15!!!**

The CIT program is for teens who have a strong desire to work with children and improve their leadership skills. Participants will assist the summer camp counselors in implementing activities, ensuring the safety of children, and creating a fun environment for campers.

POSITIONS ARE LIMITED.

ACCEPTING APPLICATIONS BEGINNING
APRIL 29TH IN PARK OFFICE
APPLICATIONS CAN BE FOUND ONLINE
LAPARKS.ORG/RECCENTER/RESEDA

FOR MORE INFO:

(818)881-3882

**WWW.LAPARKS.ORG
/RECCENTER
/RESEDA**





CAMP REGISTRATION FORM

Please print legibly

Please email us complete registration form to reseda.recreationcenter@lacity.org

Camper's T-Shirt Size (Please Circle): YS, YM, YL, AS, AM, AL, AXL

Camper's Name: _____ MALE / FEMALE / OTHER

Date of Birth: _____ Age: _____ (Please provide proof of age: Birth certificate/ID/ Passport/Etc.)

School: _____ Grade: _____ Home Schooled: YES NO

Does your child receive support from a shadow at school during the school year? YES NO

Address: _____ City: _____ State: _____ Zip: _____

Parent/Guardian: _____ Legal Custody: YES NO JOINT

Relationship to Camper: _____ Primary/Cell Phone #: _____

Work: _____ Other: _____ Email: _____

In Case of Emergency, contact:

Name: _____ Relationship to Camper: _____

Address: _____ City: _____ State: _____ Zip: _____

Primary/Cell Phone #: _____ Work: _____ Other: _____

AUTHORIZED RELEASE

We do not release campers to friends, neighbors, nor relatives etc. without written confirmation from the parent/legal guardian. If parents are not available, please list any other adults authorized to pick-up child from Reseda Recreation Center. Photo ID will be required.

Name _____ Relationship _____ Phone# _____

Name _____ Relationship _____ Phone# _____

Name _____ Relationship _____ Phone# _____

Name of any person(s) specifically **NOT** to sign out the camper named above (additional documentation may be required):
 (Optional) _____

Signature of Parent/Guardian: _____ Date: _____

PARENT/GUARDIAN INFORMATION:

Welcome new and returning families to our Reseda Park Camp Run-A-Muck. We have a few suggestions and reminders to help you this camp season. Check in and out might take more time than usual, so make sure you give yourselves additional time.

- Campers must be checked & signed out daily by parents/guardian or authorized adult(s) named on this form.
- Label all personal belongings. Reseda Park is not responsible for lost, stolen, or damaged items. (Check Lost & Found if items are missing: one week after camp is over, we will donate all items left in Lost and Found bucket).
- Summer Camp Run A-Muck provides a daily lunch & snack (pack own per dietary restrictions). For other Reseda Camps, must bring lunch.
- Make sure your child has a reusable water bottle.
- Campers are not allowed to bring anything extra to camp, unless otherwise stated on newsletter (Duck Tales).
- Campers may bring their phones, but must be out of sight, out of mind. May use at down time, emergency purposes, and/or tech time.
- Let's all remind our campers to be the best version of themselves, listen to their counselors, be safe, and have fun at Reseda's Camp Run-A-Muck.

MOVIE WAIVER

I hereby give my permission for my child to watch any movies approved and shown by Reseda Park (G/PG only). Audience suitability is strictly enforced.

• Signature Parent/Guardian: _____ Date: _____

• *****Yes, my child is allowed to watch rated PG-13 movies (optional):** Signature Parent/Guardian: _____

CAMP REGISTRATION FORMS MUST BE FILLED OUT FOR A CAMPER PRIOR TO THEM COMING TO CAMP.

REGISTRATION FORMS CAN BE EMAILED TO OUR EMAIL: RESEDA.RECREATIONCENTER@LACITY.ORG OR DROPPED OFF IN OUR OFFICE.

HEALTH HISTORY

Note: To ensure your child can have the best possible camp experience that promotes fun and safety, should anything happen to the camper that would alter their health history please notify park office personnel immediately.

Allergies / Other (please specify):

Bee stings, mosquitoes, etc.: _____ Asthma
 Food (name): _____ Other: _____
 Medication(s): _____

Is the child taking any medications now that may impact their camp participation? YES or NO

If so, what is the medication (include amount & frequency): _____

Restrictions:

I have reviewed the program and activities of the camp and know the camper can participate without restrictions.
 I have reviewed the program and activities of the camp and know the camper can participate with the following restrictions or adaptations: _____

For safety & for campers to have the best experience at camp, please let us know of any other medical/behavioral information we should be aware of:

Parent/Guardian Signature: _____ Date: _____

City of Los Angeles Department of Recreation and Parks

WAIVER AND RELEASE FORM

In consideration of the City of Los Angeles acting through its Department of Recreation and Parks at Reseda Recreation Center/Park granting the above named child ("Minor") the opportunity to participate in Reseda Camp Run A-Muck ("Program")

I, (print name) _____ the undersigned, as the parent/guardian of (print name) _____ ("the Minor"),

I do hereby agree as follows:

I am aware that there are certain risks of injury and/or damage inherent in the Program's activities;

I understand that if my child misbehaves and/or is sick and needs to be sent home; I agree to pick them up at the time requested by the Camp staff;

I understand that the Camp carries no insurance.

I agree to complete the Camps Health History form providing Minor's current, complete and truthful health history

I understand that under certain medical conditions the Camp staff may require a written authorization based on a physical examination by a licensed medical person as requirement for the Minor to participate in the Program;

I confirm to the best of my knowledge and belief the Minor is neither subject to a physical or mental disability nor under the influence of any medication or substances which might hinder their safe participation or the safety of others in the Program;

I will instruct the Minor to abide by all safety rules, policies and regulations and to take reasonable precautions to minimize risks of injury or damage arising from participation in the Program as well as adhering to swimming pools rules and regulations in place by the Aquatics Division.

I give my consent to have the Minor participate in all aspects of the Program;

I knowingly assume full responsibility for all risks of bodily injury, emotional injury, death or property damage that may occur in relation to the Minor as a consequence of participation in the Program at the Camp;

I give my consent to have the Minor transported by: walking, car, van, chartered bus, chartered school bus and/or public transportation as part of the Program;

Should it become necessary for the Minor to have emergency medical care while participating in the Program, I hereby give the Camp personnel my permission to use their judgment in obtaining medical care, and, I give permission to the medical care provider selected by the Camp personnel to render medical care deemed necessary and appropriate;

Except for the gross negligence or willful misconduct of the Camp, I waive all rights of recovery which the Minor or I may have now or in the future, whether known or unknown, against the City of Los Angeles, Department of Recreation and Parks, Camp Reseda its officers, agents, employees and/or personnel, and

I release, acquit and forever discharge the City of Los Angeles, Department of Recreation and Parks, Camp Reseda its officers, agents, employees and/or personnel, from and all liability for any bodily injury, emotional injury, or other personal injury, damage, loss or expense, claims, demands, causes of action, costs, loss of services or use, compensation, debts, monetary damages, including but not limited to attorney fees, which result from or are in any way connected with the Minor's participation in the Program or any related activities;

I also authorize the Camp, City of Los Angeles and Department of Recreation and Parks to make, procure and/or use photographs, films, tapes, digital media recordings or other likeness of the Minor's physical image and/or voice as for use with the Program and/or Camps' publicity, marketing and/or advertising materials;

I have read this agreement and I understand what it means to my legal rights and the Minors participation and by my signature made of my own free will and act; I agree to abide by the rules and policies set forth in this registration and waiver release forms;

I understand the facility implements program design as needed for example as safety, emergency, health procedures not limited to mask, social distancing, washing hands, separating cohorts based on age, siblings, and disinfecting during ongoing pandemic.

I have read and understand the payment, refund and conditions of enrollment policies as found in this registration form;

I agree to be legally bound by signing this registration and waiver release forms and extend this binding to the Minor(s).

Parent/Guardian Name (print) _____ Child's Name (print) _____

Parent/Guardian Signature _____ Date _____

AUTHORIZATION TO CONSENT TO TREATMENT OF MINOR AT AUTHORIZED HOSPITAL IN CASE OF EMERGENCY ILLNESS OR ACCIDENT

I (We), the undersigned Parent/Guardian(s) of _____, a minor do hereby authorize the staff of Reseda Recreation Center as agent(s) for the undersigned to consent to any x-ray examination, anesthetic, medical or surgical diagnosis or treatment and hospital care which is deemed advisable by, and is to be rendered under the general or special supervision of any physician or surgeon licensed under the provision of the Medical Practice Act on the medical staff of a licensed hospital whether such diagnosis or treat is rendered at the office of said physician or at said hospital.

It is understood that this authorization is given in advance of any specific diagnosis, treatment or hospital care being required but it is given to provide authority and power on the part of aforesaid agent(s) to give specific consent to any and all such diagnosis or treatment or hospital care which the aforementioned physical in the exercise of his best judgment may deem advisable. This authorization shall remain effective through the conclusion of the event, unless sooner revoked in writing and delivered to said agent(s).

Signature Parent/Guardian: _____ Date: _____

PAYMENTS, RECEIPTS & REFUNDS

I am responsible for obtaining and keeping a copy of my receipt at the time of payment. Payment online will provide records to email.

Cash: Exact Cash Only, Center does not carry change.

Credit Cards: Visa and MasterCard

Checks: Make checks payable to "City of Los Angeles." Any check returned by the bank will have a "Return Check Charge" added to the total amount of payment.

A non-refundable 15% administrative fee will be assessed by the Recreation Center for any patron granted a refund. Credits, changes or transfers are not allowed. No full refunds will be issued unless the program is cancelled by the Recreation Center. No refunds for campers who are absent, sick, sent home early, and/or suspended from camp.

Signature Parent/Guardian: _____ Date: _____

FOR OFFICE USE ONLY

WEEK	DATE	RECEIPT #	STAFF	NOTES
WEEK #1				
WEEK #2				
WEEK #3				
WEEK #4				
WEEK #5				
WEEK #6				
WEEK #7				
WEEK #8				
WEEK #9				

Did camper receive camp shirt: YES or NO Staff who issued _____

Additional T-camp shirt YES How Many? _____ Staff who issued _____

YES How Many? _____ Staff who issued _____

CITY OF LOS ANGELES

Karen Bass - Mayor
Bob Blumenfield - 3rd District Council Member

BOARD OF RECREATION AND PARK COMMISSIONERS

Renata Simril - President
Luis Sanchez - Vice President
Tafarai Bayne, Fiona Hutton, Betty Tran - Commissioners

ADMINISTRATION

Jimmy Kim - General Manager
Matthew Rudnick - Executive Officer & Chief of Staff
Cathie Santo Domingo - Assistant General Manager, Planning/Construction/Maintenance
Chinyere Stoneham - Acting Assistant Manager, Recreation Services
Brenda Aguirre - Acting Assistant General Manager, Special Operations Branch

VALLEY REGION

Laura Island - Principal Recreation Supervisor II
Juan Aynat - Principal Recreation Supervisor I
Wayne Neal - Principal Grounds Maintenance Supervisor II
Joe Mendoza - Construction and Maintenance Supervisor II
Cynthia Dib - West Valley District Supervisor

RESEDA RECREATION STAFF

MICHON RICKMAN- ACTING SENIOR RECREATION DIRECTOR

CAMP DIRECTOR:

BELLE- MICHELLE GUERRA DUBON

CAMP RESEDA STAFF:

BELLE, COACH MICHAEL, GALLO, GOJI, KATT, MS. MOUSE, PRINCE ALI, SHAZAM, WOLF

RESEDA RECREATION ASSISTANTS & INSTRUCTORS:

FARSHAD AZAM, GOJGIN BASTANI, MICHAEL CARRANZA, RACHEL DONOSO, MICHELLE GUERRA DUBON, AURORA HERNANDEZ, SAL HERNANDEZ, CLAUDIA MONTALVO, OSCAR MONTIEL, ALIREZA PARSA, MARVIN PERKINS, JASON SHERIFF, STEVE ZELMAN

MAINTENANCE STAFF

MANNY NAVARREZ
JUANA YEPEZ
VICTOR HERNANDEZ

