



Fall Girl Getaways 2017

City of Los Angeles Department of Recreation and Parks

CAMP HOLLYWOODLAND

3200 Canyon Drive Los Angeles CA 90068
(323) 467-7193 camp.hollywoodland@lacity.org

For girls ages 6-14



A Few of Our Favorite Things

Check-In Friday: 5:00 pm - 6:00 pm

Check-Out Sunday: 11:00 am

OCTOBER
6-8, 2017

We will be doing a little bit of everything during this fun filled weekend. Want to learn how to sew? We will be making our own stuffed creatures. Want to learn how to cook? We will be making our own gourmet Italian dinner. Want to run around and play games? We will be playing quidditch and prisoner ball.

*Space is limited. Please register for this session by September 29th, 2017.

Ultimate Camp Challenge

Check-In Friday: 5:00 pm - 6:00 pm

Check-Out Sunday: 11:00 am

DECEMBER
1-3, 2017

Are you ready for a camp adventure like no other? This weekend will be spent searching for a map, collecting clues, deciphering clues, completing tasks, competing in challenges, rescuing a prince, hiding, running and chasing to get the ultimate prize.

*Space is limited. Please register for this session by November 22nd, 2017.



All Programs and themes are subject to change or cancellation with or without prior notice

Camp Offers:

We offer activities such as hiking, crafts, drama, sports, challenge activities and nature. Each session is themed to add variety to our program. All programs, meals, lodging, snacks, equipment and security are included in the registration fee. Each session is themed to add variety to our program.

Application Information:

Please mail completed application and full registration fee to: CAMP HOLLYWOODLAND 3200 CANYON DRIVE LOS ANGELES, CA 90068

Make all checks payable to: CITY OF LOS ANGELES

Applications are accepted and processed on a first-come, first-serve basis. The rules of acceptance and participation in the Camp programs are the same for everyone, without regards to race, color, religion or national origin. Persons with disabilities are welcome to participate in our programs. Reasonable accommodations will be made with prior arrangements.

Registration Process:

No telephone or faxed reservations will be accepted. All camp applications and registration fees are due at least one week prior to the start of the session. If registration is received after that deadline and there is still room in the session, there will be a \$15 late fee charged. It is understood and agreed that no refund or reduction in fees are made for late arrivals, early departures, in's & out's, withdrawal or request to leave due to misconduct. A waiting list will be started if all spaces are filled. Names will be added in the order in which applications are received.

Cabin Assignments:

Campers will be assigned to cabins according to age. Our age groups are 6-8, 9-11 and 12-14.

We will no longer be accommodating cabin buddy requests.

Cancellation & Refund Policy:

All cancellations must be made in writing and have a copy of the original receipt. Telephone calls must be followed up with a written request for refund. Refunds take at least 10-12 weeks after the session has ended. Registration fees will be refunded as follows; Less \$10 per person with two weeks or more notice; Less \$25 per person with less than two weeks notice. There are NO REFUNDS for FAILURE TO SHOW.

Camp Hollywoodland Registration and Acknowledgement of Risk and Waiver Release Form

OUR FAVORITE THINGS October 6 - 8, 2017

ULTIMATE CAMP CHALLENGE December 1 - 3, 2017

Camper #1 Name _____ Date of Birth _____ Age _____

Camper #2 Name _____ Date of Birth _____ Age _____

Address _____ City _____ State _____ Zip _____

Home Phone () _____ Work/Cell () _____

Parent/Guardian _____ Email _____

In case of emergency, contact _____ Relationship _____

Phone () _____ Work/Cell () _____

Please fill out this form in blue or black ink

In consideration of the City of Los Angeles acting through its Department of Recreation and Parks and Camp Hollywoodland ("Camp") granting myself and child(ren) ("Minor") the opportunity to participate in the Camp Hollywoodland Program ("Program")

I, (print name) _____ the undersigned, and the parent/guardian of
 (print camper #1 name) _____ ("the Minor") and as the parent/guardian of
 (print camper #2 name) _____, 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 I and/or 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 Director and/or designated staff;
I understand that under certain medical conditions the Camp staff may require a written authorization based on a physical examination by a licensed medical persons as requirement for myself and/or the Minor to participate in the Program;
I confirm to the best of my knowledge and belief that I and/or the Minor is not subject to a physical or mental infirmity 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 follow and/or 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;
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 myself and/or the Minor as a consequence of participation in the Program at the Camp;
I agree and/or give my consent to have the Minor transported by: car, van, chartered bus, chartered school bus and/or public transportation as part of the Program;
I understand that the Camp has no obligation to obtain medical treatment for myself and/or the Minor. Should it become necessary for I and/or 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;
I understand that the Camp at it's sole option but without obligation may procure insurance to cover part or all of such medical expenses incurred by myself and/or the Minor;
I understand and agree that any cost incurred for such treatment which is not covered by insurance shall be my sole responsibility;
I, (PRINT NAME) _____ **waive** all rights of recovery which the Minor or I have now or in the future, whether known or unknown, against the City of Los Angeles, Department of Recreation and Parks, Camp Hollywoodland, 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 Hollywoodland its officers, agents, employees and/or personnel, from any 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, compensations, debts, monetary damages, including but not limited to attorney fees, which result from or are in any way connected with my and/or the Minor's participation in the Program or any related activities;
I agree to keep the Camp advised if I will be out of contact for any period of time during the Program and to provide additional and/or alternate contact information prior to my leaving;
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 myself and/or the Minor's physical image and/or voice as for use with the Program and /or Camps' publicity, social media, marketing and/or advertising materials; I have read this agreement and I understand what it means to my legal rights and my and/or the Minors participation and my signature is 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 agree to be legally bound** by signing this registration and waiver release forms and extend this binding to the Minor(s).

Important: Parent or Guardians Original Signature Required

Child's Name (Please print #1) _____

Child's Name (Please print #2) _____

Parent/Guardian Name (Please print) _____

Signature _____ Date _____

Payment Received On: _____ / _____ / _____	Amount \$ _____
RW: _____	Confirmation Sent: _____
Notes: _____	

For Office Use Only