2019 WINTER CAMP

December 23 - January 10

Registration Begins December 2

e-mail: Encino.communitycenter@lacity.org
web: https://www.laparks.org/reccenter/encino-community
Welcome to Camp Encino

Camp Dates: December 23 - January 10
Camp Days: Monday - Friday
Camp Hours: 9:00am - 4:00pm
Extended Care Hours: 7:30am - 6:00pm

Weekly / Daily Rates & Fees
$25.00 Registration Fee per child (includes 1 camp shirt)
$185.00 5 days per week, includes trip
$175.00 4 days, includes trip (weeks 1 & 2)
$170.00 4 non-trip days per week
$160.00 Any 3 non-trip days per week
$20.00 Extended Care Weekly Fee (flat rate for 1-5 days)
$10.00 Additional Camp T-Shirt (must wear daily)
$1.00 Late Pick-Up fee (per minute, per child after 6pm)

Camp Encino offers a wide variety of activities including sports, arts & crafts, science, games, cooking, drama, weekly themed events, individual awards, group awards, contests, dress up days, special guests, great field trips, and MORE!

Week 1
December 23 - December 27
Field Trip: Knott’s Berry Farm
Theme: Medieval Madness!
**Camp is Closed on Wed., Dec. 25, 2019**

Week 2
December 30 - January 3
Field Trip: John’s Incredible Pizza
Theme: Leggo My Lego
**Camp is Closed on Wed., Jan. 1, 2020**

Week 3
January 6 - January 10
Field Trip: Mulligan Family Fun Center
Theme: S’mores and More!
**Camp offered Monday-Friday this week**

We reserve the right to cancel programmed activities without prior notice.

As covered entity under Title II of the Americans with Disabilities Act, the City of L.A. does not discriminate on the basis of disability, and upon request will provide reasonable accommodations to ensure equal access to its programs, services and activities.
Child’s Name __________________________  Current Grade _____  Group ________

Registration Application

WINTER CAMP

Encino Community Center
4935 Balboa Blvd. • Encino, CA 91316
Phone (818) 995-1690

December 23 - January 10

Payment is due in full for all weeks at the time of registration.

Please put an x in each box for the days you wish your child to attend camp. Also, place an X in the EC box of each week you will need extended care.

营 Period Breakdown

| $25.00 | Registration Fee | $ |
| $185.00 | (5 days) | X______ Weeks Paid in Full | $ |
| $175.00 | (WK 1 & 2) | X______ Weeks Paid in Full | $ |
| $170.00 | (4 days) | X______ Weeks Paid in Full | $ |
| $160.00 | (3 days) | X______ Weeks Paid in Full | $ |
| $20.00 | (EC) | X______ Weeks Paid in Full | $ |
| $10.00 | T-Shirt(s) | $ |

Total Received $ |

Receipt # |
Initial Payment Date |
Staff Name |
T-Shirts Received? Qty | |

Tuition Receipt Date |
Other Receipt Date |
Other Receipt Date |
Other Receipt Date |
Other Receipt Date |
Other Receipt Date |
Other Receipt Date |

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

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

_____ Each week it is my responsibility to obtain and thoroughly read the weekly newsletter as it contains important information regarding weekly activities and field trips.

_____ Payment for all weeks are due at the time of registration. Your child is not guaranteed enrollment unless payment is made in advance.

_____ Extended Care is a flat rate of $20.00 per week whether the child attends 1 day or all 5 days. Extended care hours are from 7:30am-9am and 4:00pm-6:00pm.

_____ All registration fees are Non-Refundable & Non-Transferable. Any full payment transfer requests will incur a $30.00 per week charge.

_____ All refunds will be accessed a 15% administration fee in addition to the non-refundable deposits and registration fees.

_____ A $1.00 per child, per minute late fee will apply to any child picked up after 6:00pm.

_____ All Camp Encino rules and policies stated in the Registration Booklet and in the Parent Handbook.

PLEASE COMPLETE BOTH SIDES OF THIS FORM AND RETURN IT WITH PAYMENT TO THE OFFICE.
Child’s Gender: (please circle) Male / Female  Current Grade: ______  School: ______

Child’s Name: ___________________________________________  Age: ______  Birth date: ______ / ______ / ______
First ___________________________________________  Last ___________________________________________

Address ___________________________________________  City __________________________  State ______  Zip Code ______

Parent / Guardian’s Name: ___________________________  E-mail Address: ___________________________

Home Phone:( )_________  Cell Phone:( )_________  Work Phone:( )_________

Parent / Guardian’s Name: ___________________________  E-mail Address: ___________________________

Home Phone:( )_________  Cell Phone:( )_________  Work Phone:( )_________

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

Please Note: If biological parent is not permitted to pick up child, written documentation by the court is required.

Name_________________________________________  Phone:( )_________  Relation ______
Name_________________________________________  Phone:( )_________  Relation ______
Name_________________________________________  Phone:( )_________  Relation ______
Name_________________________________________  Phone:( )_________  Relation ______

MEDICAL INFORMATION: Insurance Provider ______  Policy # ______
Physician________________________ Phone:( )_________  Dentist________________________ Phone:( )_________

Is child on medication? Yes____ No____

If so, list medication:________________________ Amount________________________ Frequency________________________

Reason for limitations of physical activities, if any___________________________________________________________

List any major illnesses, allergies, medical conditions, or behaviors we should be aware of in case of a major emergency __________________________

PLEASE READ THROUGHLY AND SIGN IN THE PERTINENT PLACES. CAMPERS WILL NOT BE PERMITTED TO PARTICIPATE IN ANY CAMP ENCINO 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 Encino’s WINTER 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. 1. 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 delivered 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 Camp carries insurance. 2) Refunds may be issued for long-term illnesses only (3 consecutive camp days or more), provided that we receive a signed note from a licensed physician within the same week the child was absent. A 15% processing fee will apply to all refunds in addition to all other non-refundable fees. Allow 6 to 8 weeks for processing of refunds. No full refunds will be given unless activity is cancelled by the community center. 3) All camp deposits are absolutely non-refundable and non-transferrable, NO EXCEPTIONS. 4) Tuition, must be paid in full (for all camps), no later than said due date, or you may lose your space in the program and your deposit. If payment has not been paid by said due date, a late fee of $10.00 will apply. If you require a paid week to be transferred, there will be a $30.00 per week charge. 5) Campers must meet age requirements by the start of camp. Staff reserves the right to require proof of age at any time. 6) For safety purposes, parents must obtain an early release form the office before campers will be released during camp hours. 7) 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 anytime a staff member 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. 8) For safety purposes, a camp T-shirt and tennis shoes must be worn daily, NO EXCEPTIONS. Children attending camp without a t-shirt will be issued one and you will be billed appropriately. 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. 9) 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. 10) Parents are not permitted to drop-off, pick-up, or accompany the children on any camp field trips. 11) Staff reserves the right to change or alter programming at any time without notice. 12) All cell phones, personal toys, games, and other items are NOT permitted at camp. The camp, the staff, and the City of Los Angeles, Department of Recreation and Parks are not responsible for any broken, lost or stolen items/articles. 13) Camp Hours are from 9:00am-4:00pm. On any day that a child is signed in before 9:00am or after 4:00pm, you will be charged the $20.00 extended care fee. Extended Care hours are available from 7:00am to 6:00pm at an additional cost. Camp ends at 6:00pm. If your child is not picked up by 6:00pm a $1.00 per child late fee will be accrued for each minute late, over and above all other fees. 14) All activities, other than scheduled field trips will occur at Encino Community Center, Encino Park, and/or Encino’s Women’s 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 ______/______/______

Notes:
- Registration Form for Camp Encino's Winter Camp Program.
- Includes sections for medical information, authorization to participate, general policies, and signatures.
- Details about program policies, fees, and procedures are outlined.
- Parents are responsible for preparing their child with necessary items and understanding the program rules.
- Registration fee and deposit details are provided.
- Refund policy and timelines are mentioned.
- Contact information for the community center is included.

Please sign the form to confirm agreement with the policies and authorize participation.