

Tarzana Recreation Center Presents

(818) 343-5946 | 5655 Vanalden Ave, Tarzana, CA 91356



TARZANA HARVEST CAMP

November 24-26
(Monday-Wednesday)

**ONLY
50 SPOTS
AVAILABLE**

- ★ Ages: 5-13
- ★ Price: \$150 for the session
- ★ Times: 8:30am - 4:30pm
- ✎ Activities: Fun Games, Crafts, Sports, Thanksgiving Lunch & More!

📅 Registration Opens:
October 6 at 9am

⚡ **ONLY 50 SPOTS
AVAILABLE – DON'T
MISS OUT!**

REGISTER EARLY!

If you are a person with a disability and require accommodation to participate in a City of Los Angeles Department of Recreation and Parks program, service, or activity, requests may be made by calling the facility, or 711 for CA Relay, ten days in advance of the event. We will do our best to fulfill requests with less than ten business days' notice. If a participant requires a one to one aide, requests will be fulfilled within seven business days of receiving required paperwork and documentation needed to issue a Right of Entry Permit to the agency providing the aide.

CAMP TARZANA FALL 2025 REGISTRATION FORM

(Please Write All Information Correctly And Legibly)

Campers Gender: Male/Female Grade In Fall: _____ School: _____

Camper's Name: _____ Age: _____ Birthday: ____/____/____

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

Home Phone: _____ Cell Phone: _____

Email Address: _____

Parent/Guardian (1) Name: _____ Phone Number: _____

Parent/Guardian (2) Name: _____ Phone Number: _____

Emergency contact (Not parent): _____ Phone Number: _____

I authorize ONLY these additional persons to pick up my child, including car pools:

Name: _____ Relation: _____

Name: _____ Relation: _____

Name: _____ Relation: _____

If you wish to allow your child to check him/herself out of camp unaccompanied, please sign _____

Note: Only campers 12 and older are allowed to sign themselves In & Out.

Medical - Insurance Provider: _____ Policy #: _____

Physician: _____ Phone: _____ Dentist: _____ Phone: _____

Is your child on any medication? Yes ☐ No ☐

If so, what kind: _____ Amount: _____

frequency: _____ Signature: _____ Date: _____

Reason for limitations of physical activities, if any _____

List any major illness or medical conditions or behaviors that we should be aware of in case of a major emergency.

AUTHORIZATION TO PARTICIPATE

My child, print name _____, a minor has my authorization to participate in Camp Tarzana's 2025 FALL 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 Camp carry insurance. 2) Refunds may be issued for long-term illnesses only 5 consecutive camp days or more, provided that we receive a signed note from a licensed physician within 3 days after illness. Allow 4 to 6 weeks for processing of refunds. 3) All camp deposits are absolutely nonrefundable, NO EXCEPTIONS. 4) The tuition money, paid in full (for all camps), is due before services rendered, or you may lose your space in the program and your deposit. 5) Staff reserves the right to require proof of age at any time. Campers must meet age requirements by the start of camp. 6) Written permission must be provided if you wish your child to be released to anyone other than those authorized on the registration form. 7) For safety purposes, camp t-shirts and closed toe tennis shoes must be worn daily. NO EXCEPTIONS. Children attending camp without t-shirts will be issued one by the staff and you will be billed appropriately. 8) Parents are not permitted to accompany campers on any camp field trips. 9) Staff reserves the right to change or alter programming at any time without notice. 10) Staff is not responsible for lost or stolen articles. 11) Programmed activities occur from 9:00 AM to 4:00 PM. 12) All activities, other than field trips will occur at Tarzana Recreation Center. 13) By participating in our programs, patrons agree to allow the City of Los Angeles Department of Recreation and Parks, the Tarzana Rec. Center and Camp Tarzana to use photographs, video tapes, and testimonials of participants for use in publicity materials free of any fee or usage charge.

I have read and understand the AUTHORIZATION TO PARTICIPATE, GENERAL POLICIES and DISCIPLINE PROCEDURES/POLICY. I here-by 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: _____ Date: _____

Initial Payment Schedule - Office Use Only

\$150	Session Fee	Receipt Number	Date Paid
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