Household#: __________

My child, (print name), a minor, has/have my authorization to participate in the Woodland Hills Recreation Center programs and all activities therein. 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(ren) resulting from and/or in connection with activities in this program. I, the undersigned, as parent/guardian of the above mentioned minor(s) do hereby authorize the City of Los Angeles to act as agent for the undersigned; to consent to 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 of 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 to any and all such diagnosis, treatment or hospital care deemed advisable.

I have read and understand the Authorization to Participate and Medical Release Policies. If anything happens to the Student that would alter health history information after this form is returned, it will be your responsibility to let the school know immediately.

_________________________________________________________________________________________________________________________
Please read thoroughly and sign in the pertinent places. Students will not be permitted to participate in any Woodland Hills Recreation Center program unless this form is filled out completely and signed.

- **AGE:** Students must meet age requirements by September 1. Staff reserves the right to require a birth certificate for proof of age at any time.
- **BEHAVIOR/SAFETY:** I understand that there is a zero tolerance policy in regards to the safety of each student. There will be no fighting of any kind including pushing, shoving, hitting, biting, scratching, verbal abuse, or bullying. Woodland Hills R.C. may use written warnings to report behavior to parents, of these may result in your child being discharged from the programs. I understand that Woodland Hills R.C. reserves the right to expel or discharge a student for misbehavior without a refund.
- **DIETARY RESTRICTIONS:** I understand that it is my responsibility to inform the teacher(s) of any dietary restrictions that my child may have. I understand that I may need to provide my child with their own food/beverages.
- **DRESS CODE:** For safety purposes, I understand that closed toed and heeled shoes must be worn daily.
- **EMERGENCIES:** I understand in the event of a natural disaster my child will only be released to those persons authorized on the Emergency/Registration form and ID will be required to release my child.
- **INSURANCE:** I understand neither the Department of Recreation and Parks nor Woodland Hills R.C. programs carry insurance.
- **MAKE-UP DAYS:** I understand that there are NO "MAKE-UP" days for time missed in school.
- **MEDICAL INFORMATION:** If any medication or topical cream/ointment is required, please request a medical form which must be brought with the medication to the office. This includes any type of cream that needs to be applied, including sunscreen.
- **MEDICAL EXCLUSION:** I understand that if my child has a communicable disease including head lice or pink eye, they will not be permitted to attend Pre-School/Pre-K until they are medically cleared. I understand that if my child is sent home due to illness (fever, vomiting, uncontrolled diarrhea, strep-throat, etc.) they may not return to school unless they have been free of symptoms for 24 hours.
- **PARENT CODE OF CONDUCT:** I understand that it is expected of me to help ensure a safe and positive environment for all students, families, teachers, and staff while I am at Woodland Hills R.C.. I will refrain from physical and verbal altercations and interfering behavior with students, families, teachers, staff and patrons of the park. Verbal altercations include, but not limited to yelling, harassment, bullying, and persistent negativity. I understand that my actions may jeopardize my child’s enrollment in the Pre-School/Pre-K Program.
- **PARENTAL OBSERVATION:** Although parents are welcome to observe the program at any time, for the safety and happiness of the children, parents are not permitted to linger in or around the program for extended periods of time. This period of time is determined at the discretion of the teacher and/or facility director.
- **PARKING:** I understand that there is NO CURB OR DROP OFF, STOPPING OR PARKING in the red zones, staff parking or parking in handicap spots without placard displayed. Parents/guardians must accompany their child during sign in and sign out.
- **REGISTRATION/PAYMENT:** I understand that the $50 registration fee is nonrefundable and nontransferable under any circumstances.
- **SPLIT PAYMENT:** Parent/Guardian will be held responsible for determining payment between families who do not share a household.
- **PAYMENT SCHEDULE:** I understand that the payments for Pre-School/Pre-K are due on the first Tuesday of each month, unless otherwise noted. I understand that these payments are broken up for my convenience and Pre-School/Pre-K are not a monthly class. I understand that if I do not pay for Pre-School/Pre-K on time I will be charged a $25 late fee. No exceptions. I understand failure to pay on time may risk my child’s position in the class being dropped and replaced. No payment will be collected for December and June. See payment calendar for dates payment is due.
- **REFUND POLICY:** Full refunds are only issued when the center cancels an activity and no refunds will be issues once a program has started. A 15% cancelation fee is assessed by the Dept. of Recreation and Park for all refunds, changes, or transfers. No refunds will be made to patron making false statements on registration forms, such as, but not limited to, age. Written proof of reason for refund may be required.
- **PERSONAL ITEMS:** L.A. City Department of Recreation & Parks nor the Woodland Hills R.C. will not be held responsible for personal items brought to school, this includes lost or stolen items. Such items include: toys, games, cards, iPads, CELL PHONES, iPods, and handheld games.
- **PHOTOGRAPHS:** By enrolling my child into the pre-k program, I allow the City of Los Angeles Department of Recreation and Parks and the Woodland Hills R.C. programs to use photographs, video tapes, and testimonials of participants for use in publicity material free of any fee or usage charge unless otherwise notified.
- **RECEIPTS:** I understand that the receipts that I receive for any payments will serve as proof of payment for income tax purposes. All receipts should be retained, as Woodland Hills R.C. will not provide additional copies of receipts or payment records.
- **SHADOWS/AIDES:** All shadows or aides must be fingerprinted by the Dept. of Rec. & Parks. Shadows will not be allowed to attend until they have been approved. I understand that Woodland Hills R.C. and Pre-School/Pre-K program are not responsible when my child is taken away from group by shadow or aide.
- **SIGN-IN & OUT:** Parents or authorized persons must sign student(s) in and out each day. Sign-in begins at 9:00a.m. and sign-out ends at 1:00p.m. A late fee of $10 will be charged to the parents/guardians if a child is picked up after 1:00 pm. I understand that there is no early drop off nor late pickup.
- **Photo ID may be required to pick up any student.** Permission must be provided in writing if you wish your child to be released to anyone other than those authorized on the registration form.

I have read and understand the 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 a refund.

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Parent/Guardian Name (Print) ___________________________  Signature ___________________________  Date ____________