



Los Angeles County Department of Parks and Recreation
CASTAIC LAKE RECREATIONAL AREA
Creating Community Through People, Parks and Programs

Registration and Emergency Information Form

Date of Campout: 6/26/2014

CASTAIC LAKE

Participant's Name: (everyone that is camping must be listed below)

(First/Last) _____ (Age) _____

(First/Last) _____ (Age) _____

(First/Last) _____ (Age) _____

(First/Last) _____ (Age) _____

Address: _____ City/Zip: _____

Email: _____

Home Phone: (____) _____ - _____ Cell Phone : (____) _____ - _____

Driver's License: State _____ Number: _____ Exp Date _____

1. On any regular medication? _____ If yes, for what condition. Please explain: _____

2. Please use this space for any special instructions or information our staff should know (Allergies, Food Diets...):

Title VI Compliance

The County of Los Angeles Department of Parks and Recreation is a sub recipient of Federal Assistance, if you feel you have been subject to discrimination on the basis of race, color, national origin, age, sex, or handicap you may file a complaint with the County of Los Angeles Department of Parks and Recreation 433 South Vermont Avenue, Los Angeles, California 90020, or the Office of Equal Opportunity, United States Department of Interior, Washington D. C.

CONSENT TO TREATMENT OF MINOR: In the event of sudden illness, accident, or injury which may occur while said minor is engaged any activity supervised by the County of Los Angeles Department of Parks and Recreation staff and its representatives, agents, or assignees, when neither the parent nor the guardian can be contacted. I hereby give my consent pursuant to California Family Code Section No. 6910 for emergency treatment as shall be necessary under the circumstances by any physician licensed under the laws of the State of California.

Parent/Guardian Signature: _____ **Date:** _____

In case of Emergency, please contact the following:

1. _____
Name Relationship Phone #

2. _____
Name Relationship Phone #

PHOTOGRAPHY CONSENT, RELEASE AND WAIVER OF LIABILITY

I hereby give my consent to the County of Los Angeles to photograph me and use the photograph(s) for informational, educational, promotional or publicity purposes concerning the county and its services.

I understand that the photograph(s) may be used on the county's Website, or in official county publications or displays, public newspapers, magazines reports, or other public documents; or electronic or digital recordings. I also understand that the photograph(s) may be used without any further consent or authorization from me; the county may modify the photograph(s) in the process of editing, and I will not be entitled to any compensation for use of the photograph(s). I also agree to release the County of Los Angeles, its officers, employees, or agents) from any and all liability arising out of or connected to the use of the photograph(s) as stated above. I have read and understand the foregoing consent, release, and waiver of liability, and voluntarily accept and agree to its terms.

Waiver of Liability: By signing this waiver, I agree to release and hold harmless the County of Los Angeles, State of California, Castaic Lake, its agents and employees from any claim arising from my or my child's voluntary participation in a Los Angeles County class or activity, including classes or activities which involve some inherent personal risk. In the event of illness or injury, I consent to whatever emergency medical care is considered necessary in the best judgment of the attending physician, surgeon or dentist and performed by or under the supervision of a member of the medical staff of the hospital or facility furnishing medical or dental services. It is understood that resulting expenses will be the responsibility of the participant or participant's parent or guardian, if the participant is a minor. I have read and fully understand this Waiver of Liability.

Please check box if you **do not** want your email above to be used for the Castaic Lake Email List.

Date of Signature: _____

If 18 years of age or older: Name (print): _____ Signature: _____

Castaic Lake JG Campout Code of Conduct

In order to provide a physically and emotionally safe environment for all members, we ask that staff, members, campers and visitors adhere to the following code of conduct:

Smoking is prohibited unless given permission by a staff member, use of non-prescription drugs, alcoholic beverages, firearms or fireworks, carrying or concealing a weapon or any object that may be used as a weapon, harassment or intimidation by words, gestures, or body language, bullying or threatening another person verbally or physically is prohibited.

All participants must follow rules and directions given by staff members.

LA County Parks and Recreation or the State of California does not assume responsibility for personal property that is lost, stolen or damaged.

All attire, including swimming attire, must be appropriate to a family environment

Staff members must be informed of all accidents.

Members should notify the appropriate staff of any medical problems by completion of a waiver. Medical problems will be kept in confidence with the office and field staff.

Bikes, rollerblades, skateboards and helies are not permitted unless directed.

No pets are permitted on the trip. *Exceptions will be granted with permission from staff.*

Loitering/solicitation within or on the grounds is prohibited.

ALL JG PARTICIPANTS **MUST HAVE A PARENT/LEGAL GUARDIAN PRESENT
THE ENTIRE TRIP.
*NO DROP OFF/PICK UPS ALLOWED***

_____ Parents may **NOT** transport any other participant of the program unless they are a (INT.) Legal guardian of said participant.

FAMILY MUST PROVIDE THEIR OWN TRANSPORTATION TO AND FROM THE Beach for Camping

_____ I also know that set up can not begin until 5pm and that the next morning cleanup must be done (INT.) by 9AM. Also a PARENT/GUARDIAN must be with the participant during the camp out.

My signature below confirms that I understand and agree to comply with the following "Rules and Regulations" stated above. I also understand that this activity may involve some risks, and that I am liable for loss or damage to any equipment and for the personal safety of the occupants. I therefore agree that I am assuming all risks in connection with my participation. I understand, if the rules and regulations are not followed, I will be asked to leave the **JG Family Campout** area and will not receive a refund of any type.

All Participants must sign:

_____	_____
Signature	Date
_____	_____
Signature	Date
_____	_____
Signature	Date
_____	_____
Signature	Date