



2019 Great American Campout Registration Form

June 22, 2019 – Hillandale Park

Parent/Guardian: (must remain onsite throughout the event) **Amount of Tents:** _____

Name: _____ Phone: _____

Address: _____ City: _____ Zip: _____

Email: _____

Emergency Contact and Phone: _____

Other Campers

Name: _____ Birth Date: _____ Relation: _____

Name: _____ Birth Date: _____ Relation: _____

Name: _____ Birth Date: _____ Relation: _____

Name: _____ Birth Date: _____ Relation: _____

Name: _____ Birth Date: _____ Relation: _____

Event Timeline

-4:00pm-6:00pm: Campsite selection and setup

-4:00pm-8:00pm – Activities will be available throughout the park or on your own

-Dinner will be on your own – see rules and regulations for further information

-8:30pm-10:00pm – Group campfire available (no individual campfires permitted)

-10:00pm-7:00am – Quiet hours

-9:00am – Campsites must be cleaned and cleared

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

(Please return to Erik Dart at Erik.Dart@harrisonburgva.gov or 305 S. Dogwood Drive, Harrisonburg, VA 22801)

Authorization to Photograph

I give permission to the Harrisonburg Parks & Recreation Department to take photographs and video recordings of me, my child, and my family members while participating in recreational activities, and further agree that the Harrisonburg Parks and Recreation may use said Child's name, face, likeness, voice, and appearance in connection with exhibitions, publicity, advertising, promotional and commercial materials, without reservation or limitation, in print, on the City website, or other broadcast or social media. These photographs will only be used for City promotional and informational purposes and will involve no compensation to me or my family members for any photograph.

_____ YES, I give my permission for my child/family members to be photographed.

_____ NO, I **do not** give permission for my child/family members to be photographed.

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