

# Kids Night Out 2009

## Information

Kids Night Out is held every Thursday night from June 4<sup>th</sup> – August 13<sup>th</sup>. Enrollment is open to children ages 4 – 11 that are residents or guests of Ocean Lakes. Based at the Recreation Center, our facilities provide a safe and comfortable environment where the kids can play, learn, and grow together.

The children are involved in a variety of activities such as crafts and field games. We will also show a movie during Kids Night Out, and the kids are treated to a pizza dinner.

Children can be dropped off between 5:50pm and 6:00pm, and they should be picked up between 9:50pm and 10:00pm. Your child will need to be signed in and signed out by a parent/guardian.

## Registration Information

We offer a few quick and easy options for registering your child for Kids Night Out.

- ▶ Print out page 2 of this form and mail it in with payment to the address listed on the bottom of page 2. If using this option, please remember to walk your child inside on the evening of Kids Night Out in order to sign him/her in.
- ▶ Stop by the Recreation Office when you arrive at Ocean Lakes to reserve a spot for your child. Space is limited so we recommend signing up as early as possible. The deadline to sign up is 3:00pm on the day of the event.

## Fees/Payment Information

- ▶ \$15 per child

If you have any questions, please call the Ocean Lakes Recreation Office at 843-238-0130, or email your questions to [HLee@oceanlakes.com](mailto:HLee@oceanlakes.com).

# Kids Night Out Registration Form

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▶ Name of Child/Children: a. \_\_\_\_\_ Age \_\_\_\_\_

b. \_\_\_\_\_ Age \_\_\_\_\_

c. \_\_\_\_\_ Age \_\_\_\_\_

▶ Site # : \_\_\_\_\_ ▶ Phone #: \_(\_\_\_\_\_)\_\_\_\_\_

▶ Special Needs/Medical Concerns: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

▶ Name of Parent/Guardian: \_\_\_\_\_

▶ Names of authorized individuals that may pick your child/children up:

a. \_\_\_\_\_ b. \_\_\_\_\_ c. \_\_\_\_\_

▶ Date(s) my child will attend Kids Night Out: \_\_\_\_\_

.....  
▶ Permission:

I hereby give permission for the child/children listed above to participate in any or all activities or facilities within Ocean Lakes Family Campground. I also agree to hold harmless Ocean Lakes Family Campground and its employees from and for which any injury or accident which could occur to the above mentioned participant(s).

I further authorize Ocean Lakes Family Campground and its employees, in the event of any emergency, to seek any and all assistance, medical or otherwise, that in its judgement are deemed necessary under the circumstances without first attempting to contact me. I further agree to accept responsibility for the cost of any emergency treatment ordered.

▶ Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please mail your completed registration form along with payment to:  
Ocean Lakes Family Campground  
Recreation Dept – Attn. Activities Coordinator  
6001 South Kings Highway  
Myrtle Beach, SC 29575