



## **Table Mountain (Angeles), Wrightwood, CA August 14-16, 2009**

Table Mountain Campground is in the Angeles National Forest Big Pines area. It is a few miles from the town of Wrightwood. The elevation here is about 7,500 feet and the campground has a spectacular view of the Mojave Desert below. Summer temperatures are in the low 80's with cool evenings.

### **Campground Information**

We will be at the Cherokee Lane section of the campground and we have reserved sites 87, 88, and 90. This facility has vault toilets, fire pits, water spigots, some grills, and some bear boxes. There are picnic tables, nature trails, and firewood is available for purchase.

*Bears do frequent the area and all food must be kept in approved containers.*

### **Activities**

#### Friday

Arrive any time after 2 PM and set up your tent. Dinner is on your own with campfire at sundown.

#### Saturday

There will be an organized hike on Saturday morning. You will need hiking boots, a day-pack, water, the ten essentials, and a sack lunch.

Traditional Tea at 4 PM.

The Great Outdoors potluck dinner will be at 7 PM. Dinner will be followed by a campfire activity.

#### Sunday

Breakfast on your own and relax until check out time at 12 noon.

## **How To Get There/Transportation**

From Wrightwood, take State Route 2 west 2.4 miles to the Table Mountain Campground sign. Turn right onto Table Mountain Road and go 1 mile to the campground sign. Turn left into the campground and look for sites 87 and 88 and the Great Outdoors banner.

**Due to strict limitations on the number of vehicles allowed at the campsite, carpooling is highly recommended.** Please plan on making your own carpooling arrangements. The trip leader will provide possible carpooling suggestions.

## **Equipment**

This site is tent camping only. All regular camping equipment is needed, including a tent, ground cloth, sleeping bag, stove and fuel, cooking utensils, dishes and cutlery, folding chair, and a cooler with food. The weather is variable, so be prepared for cool nights.

## **Cancellation**

Payment in full confirms the reservation. Cancellation for a full refund must be received by August 10. After that refunds will be made only if a replacement camper can be confirmed.

## **Code of Conduct**

Those joining this trip subscribe to the Great Outdoors code of conduct. Be courteous to your fellow campers, respect the environment, respect the authority of the trip leader and adhere to G.O.camping etiquette. Quiet hours are 10 PM to 8 AM, and boomboxes and radios are strongly discouraged.



**Table Mountain Car Camp, August 14-16, 2009**

**CAR POOLING IS HIGHLY RECOMMENDED**

Do you need carpooling arrangements? \_\_\_\_\_ Can you provide a ride? \_\_\_\_\_

Fees	Members	Non-Members
Tent	\$ 30 .00	\$50.00
+ bundle of wood		+ bundle of wood

Make Checks Payable to "Great Outdoors" and  
Send to:  
Bob King  
3057 Scotland Street  
Los Angeles, CA 90039

**Non-Members receive one year membership with the enewsletter.**

**Personal Information:**

Name : \_\_\_\_\_  
Great Outdoors Member? (Y/N) : \_\_\_\_\_ If Yes, Chapter : \_\_\_\_\_ Member# \_\_\_\_\_  
Street Address : \_\_\_\_\_ City/State/Zip: \_\_\_\_\_  
Phone : \_\_\_\_\_ E-mail address: \_\_\_\_\_

**WAIVER, MEDICAL RELEASE AND ASSIGNMENT**

I am aware that my participation in the GREAT OUTDOORS may include potentially hazardous activities, and I am voluntarily participating in these activities with that knowledge and understanding that I will use my best judgment to avoid injury to myself and others. I agree to follow the directions of the trip leader and abide by the rules of the facility I am using. I hereby release GREAT OUTDOORS, including its officers, trail or trip leaders, agents or other persons working with GREAT OUTDOORS from any liability for injuries, physical or mental, which I may suffer by reason of any participation in these activities. I recognize in waiving this liability that I am assuming sole responsibility for my actions and cannot blame any injuries on any other persons connected with GREAT OUTDOORS.

I hereby agree to assume full financial responsibility for any bills incurred by me for medical treatment as the result of my participation in this GREAT OUTDOORS activity. In the event that I am unable to consent to medical care, I hereby authorize the trip leader to consent to emergency medical treatment for me, including hospitalization and surgery, as may be best determined under the circumstances.

Signature \_\_\_\_\_ Date \_\_\_\_\_

In case of emergency contact  
Relationship \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
Medical Insurance Carrier \_\_\_\_\_ Group/Policy No. \_\_\_\_\_  
Individual travel and accident insurance is available from your local travel agent.  
Physician \_\_\_\_\_ Phone \_\_\_\_\_

May photos of you appear in the Great Outdoors Newsletter? **YES:** \_\_\_\_\_ **NO:** \_\_\_\_\_

Have any Questions?? Call Bob King (Trip Leader) at (323) 660-6240 [bk78@pacbell.net](mailto:bk78@pacbell.net)