



3715 First Ave • Columbus, GA 31904
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PARENT/GUARDIAN and CHILD INFORMATION:

Child's Name: First Name _____ Last Name _____

Parent's Name: First Name: _____ Last Name: _____

Approved Adults for Pick Up: _____

ALLERGY AND OTHER INFORMATION

ALLERGIES: Please describe any allergies or food sensitivities your child has. If your child has no allergies, type or write "None" below.

*If an EpiPen is required for emergency medical care, please see the EpiPen liability waiver separate from this form.

ASSUMPTION OF RISK, RELEASE OF LIABILITY & WAIVER:

By signing this Assumption of Risk, Release of Liability and Waiver, I represent that it is my desire and intent that the child identified above (my Child) participate in the activities of VeryVera Cooking Camp, specifically including the cooking class(es) described above. I also represent that I have the authority to enter into this agreement on behalf of my Child as the Child's parent or legal guardian. I acknowledge that the participation of my Child in VeryVera Cooking classes, which includes participating in activities related to preparing and eating food, involves known and unknown risks, including the risk of physical injury, death and other damage. On behalf of my Child, I expressly and voluntarily assume any and all risks associated with participation in VeryVera Cooking class(es) and eating the food prepared there. I understand that there are risks inherent in cooking and eating the food prepared, including but not limited to, slips, falls, cuts, burns, choking, food allergy reactions and other accidents and injuries that may arise from the activity of cooking and eating the food prepared in class. In consideration for my Child being permitted to attend and participate in VeryVera Cooking class(es) and any and all of the activities that are or might be associated with VeryVera Cooking, on my Child's behalf, I release and further agree to indemnify, defend and hold harmless Jamie Keating Culinary Inc, including its members, managers, officers, owners, employees, agents, contractors, representatives, volunteers, interns, and insurers, from any and all claims, demands, actions, causes of action, lawsuits, expenses or losses (including attorney fees) whatsoever that could be brought by me, my Child or a third party acting on behalf of my Child or me for acts or omissions related in any way to, or arising out of, VeryVera Cooking classes and the preparation of food in that class for consumption. I understand that this is the entire agreement between VeryVera Cooking, their agents or employees, and me, and that it cannot be modified or changed in any way by the representations or statements of any employee, agent, volunteer or intern of VeryVera Cooking. I agree that this Agreement shall be governed and interpreted under Georgia law. I acknowledge that I have read and understand this document, which affects my Child's and my legal rights, and I am signing it on behalf of the Child, as well as his/her heirs and assigns, who will be bound by all of its terms.

Parent's Printed Name: _____

Parent's Signature: _____

Date: _____