KIDS COOKING

BOOKING FORM

CHILDS NAME	
CLASS	
YEAR	

ALLERGIES & FOOD RESTRICTIONS	

SPRINGS ARRIVAL

29th APRIL
6th MAY
13th MAY
20th MAY
3rd JUNE
10th JUNE

3.20pm - 5pm

This is a booking form for SPRINGS ARRIVAL only.

If you would like to be added to the list for *Joyful Summer*, please tick the box below. Booking form and payment will be due a week before the start of each class block.

☐ **JOYFUL SUMMER**

PAYMENT INFORMATION

Please make a payment of **£90** to secure your child's place. Please put your child's name for the payment reference.

Sophie Carrier
Lloyds Bank
30-67-33
39162560

Cancellation Policy *No refunds will be given if your child misses a class due to other commitments or illness. If Kids Cooking cancels a class, you will receive a full refund or a credit towards future bookings.*

KIDS COOKING

Your child will go directly to the outdoor kitchen after school. Please be ready to collect them from the gate at 5 PM. If someone other than the person listed on this form will be picking up your child, please inform me by email in advance.

PARENT NAME	
PARENT CONTACT NUMBER	
EMERGENCY NAME & CONTACT NUMBER	

I consent to Kids Cooking taking photographs during the sessions and sharing them with the school, other parents whose children participate in Kids Cooking, and on social media.

Please sign

I understand that the Kids cooking sessions will involve the use of kitchen utensils and appliances. I agree that Kids Cooking shall not be liable for, and I release and covenant for my child not to bring any lawsuit in any form, for any injury, loss or damage occurring in whole or in part as a result of participation in Kids Cooking sessions or entering or using the facilities unless such injury, loss or damage is the result of such person's/entities' intentional misconduct or reckless disregard of known safety rules and regulations while my child is under their instruction, supervision or control or otherwise on the premises.

Please sign

In the event of an injury for which immediate medical evaluation or care appears to be necessary, I hereby consent to Kids Cookings' arrangement for emergency transport, evaluation and medical care of my child as my agent and at my expense until such time as I or another person I have designated as emergency contact is available to assume responsibility for such arrangement. I release Kids Cooking from responsibility for such care.

Please sign