A Children's Taste of African Heritage Child **WAIVER** Form



Oldways' A Children's Taste of African Heritage ("ACTOAH cooking classes") is a children's educational cooking instruction program. By filling out this form, I grant my child permission to participate in ACTOAH cooking classes. I acknowledge that during instruction of ACTOAH cooking classes, my child will receive kitchen and cooking safety information from an Oldways Volunteer Instructor.

We want your children to be happy, healthy and safe! If you have any questions, please feel free to contact us at classes@OldwaysPT.org or 617-421-5500.

Child's First Name:	
Child's Last Name:	
Child's Birth Date:	
Parent/Guardian's First Name:	
Parent/Guardian's Last Name:	
Address:	
City: State: Zip Code:	
Allergies and Emergency Contact	
Allergies: Please describe any allergies, food sensitivities, intolerances, or other conditions your clause that may affect his/her ability to participate. If none, write "None" below.	hild has
Emergency Contact Name:	
Emergency Contact Phone Number:	

Emergency Contact Email:



Oldways ACTOAH Cooking Classes Consent and Release Form

Safety Rules: My child agrees to observe all safety rules established by the ACTOAH Volunteer Instructor. My child understands that violations of these rules can result in suspension from participation in ACTOAH cooking classes.

Health and Allergies: Before the start of ACTOAH cooking classes, it is very important that you speak with the Oldways Volunteer Instructor about any conditions, including food allergies, that might affect your child's abilities to fully participate so that you can make sure he/she can be accommodated.

Injury, Loss, or Damage: Participants will be working with kitchen equipment. Parents and participants hereby assume any and all of the risks associated with the participation in ACTOAH cooking classes. Parents and participants agree to hold harmless and release Oldways and Oldways Instructor Volunteers from any and all claims for injury, loss, or damage that take place while participating in any activities at ACTOAH cooking classes.

Photo	ography:
	Please check the box if you give Oldways permission to use photos of your child and/or you on the Oldways website, social media pages, and other promotional material for ACTOAH cooking classes.
Parer	nts/Guardians of participants have read these terms prior to the first class and agree.
	(Parent/Guardian Signature)
	(Print Name)
	(Date)