

A Taste of The Mediterranean  
**Participant Consent Form**



Thank you for participating in Oldways' *A Taste of The Mediterranean* national cooking class series. We're so happy to have you join us.

To be able to measure the effectiveness of this program, your instructor will be collecting confidential feedback and information from you on the first and last days of the series. All feedback is voluntary and will be kept strictly confidential and anonymous, using only first names or numbers.

Your feedback will help us to measure the impacts of *A Taste of The Mediterranean* and to make improvements to the program. We greatly appreciate your reflections, comments, and participation in these evaluations.

If you have any questions or concerns, please contact us at [classes@OldwaysPT.org](mailto:classes@OldwaysPT.org) or 617-421-5500.

**Please indicate your consent to participate in Oldways' *A Taste of The Mediterranean* program by signing below.**

*I understand that my participation in A Taste of The Mediterranean is completely voluntary. I understand that my privacy will be respected, and I know that I can withdraw from participation at any time.*

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(Signature)

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(Print Name)

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(Date)

### **Photography Permission**

To celebrate healthy heritage cooking across the country, we include class photos in printed materials, and on the Oldways website and social media pages. Please check the box below if you permit class photographs that include you to be published.

- If photos are taken in my class, I grant permission to Oldways to publish them in printed materials, and on the Oldways website and social media pages.
- I do not want my photos published in printed materials, or on the Oldways website and social media pages.