

Westdale Community Centre



Kids Can Cook Registration



Session Date/Time: _____

PARTICIPANT'S INFORMATION

Name: _____ Birthdate: _____
mm/dd/yyyy

School: _____ Grade: _____ Age: _____

CONTACT & EMERGENCY INFO

Home Address: _____ Phone #: _____

Parent/Guardian: _____ Cell #: _____

Email: _____ MHSC#: _____

Allergies or medical issues: _____

Is your child on medication? (please list all): _____

ADDITIONAL INFORMATION

Who else may pickup?: _____

What do we need to know about your child for them to be successful in this program?: _____

By signing this, I understand that Westdale Community Centre, Kids in the Kitchen and its facilitators will not be held liable for any costs associated with any incidents that occur while my child is participating in this program. This is **NOT** a nut free or allergy free program, following recommended food guide outline

Parent or Guardian's Signature

Date

For Kids can Cook Staff Use ONLY Registration Fee Received Media Release Signed



Westdale Community Centre

Parent Release Form for Media Recording

Child's Full Name: _____

Parent/Guardian Full Name: _____

I, the undersigned, do hereby grant or deny permission to Westdale Community Centre to use the image of my child, _____. Such use includes the display, distribution publication, transmission, or otherwise use of photographs, images, and/or video taken of my child for use in materials that include, but may not be limited to, printed materials such as brochures and newsletters, videos and digital images such as those on the Westdale Community Centre website and Facebook page.

Deny permission to use my child's image at all.

Grant permission to use my child's image.

Parent/Guardian Signature

Date