**Hodgeman County Pint Sized Chef Culinary Creation Camp**

**Participation Form and Liability Waiver**

**Child’s Name**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent’s Name**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Parent’s Contact Number**:\_\_\_\_\_\_\_\_\_\_\_\_\_

**If someone else is allowed to pick your child up, what is their name and phone number?**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Emergency Phone Number**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* **This camp will be held at the HG County Courthouse Lounge on Friday, August 9th from 9 a.m. to 2:00 p.m. (with pizza served for lunch). The Presentations will be held at Jetmore Food Center on Saturday morning, August 10th at 10:00 a.m.**

**Voluntary Health Information:** Please provide any information about your child’s medical issues-- including allergies or special dietary needs, if you feel that it is important that we know this during the MAKER CAMP on August 9 and 10th.

**Publicity Release:** I authorize Hodgeman County Economic Development and Network Kansas, or their assignees, to record and photograph my child’s image or voice for promotional or educational purposes.

**Liability Release:** I hereby release Hodgeman County Economic Development, Network Kansas, Hodgeman County, and Jetmore Food Center, and their agents, officers and employees, from all claims, demands, and causes of action of any kind that may arise from participation of me or my minor child in the Hodgeman County Pint Sized Chef Culinary Creations Camp.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Parent or Guardian Printed Name Parent or Guardian Signature**

 **DATE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**[[1]](#footnote-1)**

1. Culinary Camp Waiver.docx [↑](#footnote-ref-1)