



Get U Cooking, LLC.

Acknowledgement, Assumption of Risks and Waiver of Claims For Minors

Please read carefully before signing. This document includes a release of liability and waiver of certain legal rights. You must fill out one for each child attending class.

In consideration for my child _____ being permitted to participate in a cooking class at Get U Cooking, LLC., I(we) _____, parent(s) / Guardian(s) of _____, agree to the following provisions:

ACKNOWLEDGEMENT OF RISKS

I understand there are numerous inherent risks associated with participating in any cooking activities, including, but not limited to using sharp knives, operating hot stove, boiling water, hot oil, oven, and operating kitchen equipment. I give permission for my child to participate in all cooking activities, including those described above. I acknowledge and assume the risks involved in these cooking activities and for any damage, illness and injuries resulting from such risks. There are no physical, emotional or mental problems or limitations associated with my child’s participation in cooking class activities except as disclosed by me in writing to Get U Cooking, LLC.

I understand that this is a working kitchen. My child will obey all rules of instruction. I understand that if my child acts or behaves in a manner that is dangerous to their self or other participants, they will be removed from the activity. The instructor may allow one warning before removing the child from the activity depending on the severity of the behavior. This behavior includes reckless usage of equipment & utensils, touching or tampering with the food of other participants, running & sliding in the kitchen area and warehouse floor. These rules must be enforced to insure the safety of your child and other participants.

RELEASE, WAIVER OF LIABILITY AND INDEMNIFICATION

I, on behalf of my child, hereby release and waive any claim or prospective claim of liability by my child or by me on behalf of my child, against Get U Cooking, LLC., their employees and agents, with respect to any injuries, illness, damage or death occurring to my child while he or she participates in any and all class activities.

Parent’s Signature _____ Date _____