

# Sprouts Cooking - Child Waiver Form

We want your children to be happy, healthy and safe! If you have any questions, please feel free to call us at 866.698.6556 or email us at [info@sproutscooking.com](mailto:info@sproutscooking.com).



## PARENT/GUARDIAN and CHILD INFORMATION:

Child's Name: First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Child's Birth Date \_\_\_\_\_

Parent First Name \_\_\_\_\_ Parent Last Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZipCode \_\_\_\_\_

Phone Number: Area Code \_\_\_\_\_ Phone Number \_\_\_\_\_

Email: \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

## ALLERGY AND OTHER INFORMATION

**ALLERGIES:** Please describe any allergies or food sensitivities your child has. If your child has no allergies, type or write "None" below.

\_\_\_\_\_

\_\_\_\_\_

Emergency Contact Name

\_\_\_\_\_

Phone Number: Area Code \_\_\_\_\_ Phone Number \_\_\_\_\_

Email: \_\_\_\_\_

## ASSUMPTION OF RISK, RELEASE OF LIABILITY & WAIVER

### SPROUTS COOKING'S PERMISSION TO USE IMAGE

By signing this Assumption of Risk, Release of Liability and Waiver, I represent that it is my desire and intent that the child identified above (my Child) participate in the activities of Sprouts Cooking, LLC, specifically including the cooking class(es) described above. I also represent that I have the authority to enter into this agreement on behalf of my Child as the Child's parent or legal guardian. I acknowledge that the participation of my Child in Sprouts Cooking classes, which includes participating in activities related to preparing and eating food, involves known and unknown risks, including the risk of physical injury, death and other damage. On behalf of my Child, I expressly and voluntarily assume any and all risks associated with participation in Sprouts Cooking class(es) and eating the food prepared there. I understand that there are risks inherent in cooking and eating the food prepared, including but not limited to, slips, falls, cuts, burns, choking, food allergy reactions and other accidents and injuries that may arise from the activity of cooking and eating the food prepared in class.

In consideration for my Child being permitted to attend and participate in Sprouts Cooking class(es) and any and all of the activities that are or might be associated with Sprouts Cooking, on my Child's behalf, I release and further agree to indemnify, defend and hold harmless Sprouts Cooking LLC, including its members, managers, officers, owners, employees, agents, contractors, representatives, volunteers, interns, and insurers, from any and all claims, demands, actions, causes of action, lawsuits, expenses or losses (including attorney fees) whatsoever that could be brought by me, my Child or a third party acting on behalf of my Child or me for acts or omissions related in any way to, or arising out of, Sprouts Cooking classes and the preparation of food in that class for consumption.

I understand that at any classes, events or activities of Sprouts Cooking my Child may be photographed, filmed or otherwise have our activities recorded by Sprouts Cooking, its employees, agents or contractors. In further consideration for my Child being permitted to attend and participate in Sprouts Cooking class(es), I agree to allow the voice, image and likeness of my Child to be recorded and reproduced by photo, video, film, tape or any other media, including any electronic or digital media, and that such content may be used and reproduced for any legitimate purpose by Sprouts Cooking or its assigns. I agree that Sprouts Cooking shall own all copyrights in such content. I hereby waive any and all rights to royalties, commissions or other compensation, and any and all rights of publicity or privacy, that my Child may have, now or in the future, related to the use or exploitation of such content described above by Sprouts Cooking. I understand that this is the entire agreement between Sprouts Cooking, their agents or employees, and me, and that it cannot be modified or changed in any way by the representations or statements of any employee, agent, volunteer or intern of Sprouts Cooking. I agree that this Agreement shall be governed and interpreted under Tennessee law. I acknowledge that I have read and understand this document, which affects my Child's and my legal rights, and I am signing it on behalf of the Child, as well as his/her heirs and assigns, who will be bound by all of its terms.

- By clicking this box, I agree to the above waiver  Agree to waiver?