



**PARTICIPANT ASSUMPTION OF RISK, WAIVER,  
RELEASE AND INDEMNIFICATION**  
**Complete and BRING with you to check-in.**  
**This Form is Required for EACH Participant**

Name of Participant: \_\_\_\_\_

Session(s) Attending: \_\_\_\_\_ Year: \_\_\_\_\_

As parent/guardian of my child, I understand that Chef Camp LLC takes reasonable precautions to insure that programs and activities are conducted by qualified personnel in a safe and responsible manner. I authorize my child's participation in all activities, including but not limited to, land sports, contact sports, culinary activities, off-site field trips, fishing, swimming and aquatics activities. I acknowledge that there are risks inherent in any activities which could result in possible injury to or the death of a participant.

I understand that activities may vary due to weather conditions, a participant's needs, and/or the health or safety precautions that directly affect a particular activity and other unforeseen conditions. While participating, my child agree(s) to accept and follow all rules and instructions given by staff, and that I shall be liable for any damages caused by willful misconduct and/or deliberate misuse of equipment by my child.

I have read the participation requirements as outlined on the camp website and agree to comply. I understand that Chef Camp requires that participants meet the safety and participations standards for physical health, mobility, cognitive, visual, and auditory abilities as outlined on the camp website. Further, I understand that the camp is not a rehabilitative or therapeutic program, and does not specialize in serving those with special needs, including emotional, social, or behavioral difficulties. I understand that failing to meet the participation requirements and/or failing to provide accurate information regarding my child's disabilities and/or health conditions (either prior to enrollment and/or prior to attending) may result in participant being sent home, with no refund of fees.

I assume all of these risks and I hold harmless and do hereby release, discharge and indemnify Chef Camp LLC, and its directors, members, affiliates, officers, agents, advisors, employees and/or any related entities from all liability for loss, damage, injury or illness to my child and my child's property relating to or deriving from my child's presence at Chef Camp and my child's participation in Chef Camp activities (including in travel to or from) by whatever cause, except resulting from the reckless or intentional misconduct of Chef Camp or any of its agents/employees.

I grant permission for Chef Camp LLC and affiliates, to use, publish and disseminate any photograph, video or voice recording of my child taken during the session for promotional purposes.

**I have read and understand the contents of this Waiver form, and have additionally read and understand the Chef Camp Refund, Cancellation and Payment Policies.**

**Print Parent Name:** \_\_\_\_\_

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_