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**Waiver and Release Form**

By signing this Assumption of Risk, Release of Liability and Waiver, I represent that it is my desire and intent that the child identified below (“my Child”) participate in the activities of *Youthage Culinary Program Inc.,* specifically including cooking classes, events or parties. 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 the *Youthage Culinary* cooking parties, which includes engaging in activities related to preparing a meal and then later sampling that meal, involves significant known and unknown risks, including physical injury or death. On behalf of my Child and me, I expressly and voluntarily assume any and all risks associated with participation in *Youthage Culinary Program Inc.* classes, parties and events and the food prepared during these classes, parties and events. I understand that there are risks inherent in cooking and eating the food, 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 *Youthage Culinary* *Program* Inc. parties and any and all of the activities that are or might be associated with *Youthage Culinary Program Inc.*, on my Child’s behalf, and also on my own behalf, I release and further agree to indemnify, defend and hold harmless *Youthage Culinary Program Inc.,* 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 attorneys’ 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, *Youthage Culinary Program Inc.* cooking parties, classes, events and the preparation of food.

Photography and Videography: I understand that any classes, events or activities of *Youthage Culinary Program Inc.* my Child may be photographed, filmed or otherwise have our activities recorded by *Youthage Culinary Program Inc.*, its employees, agents or contractors. In further consideration for my Child and me being permitted to attend and participate in *Youthage Culinary Program Inc.* events. I agree to allow the voice, image and likeness of my Child and me 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 or its

assigns. I agree that *Youthage Culinary Program Inc.* 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 or I may have now or in the future, related to the use or exploitation of such content described above by *Youthage Culinary Program Inc*. If my Child or I provide written feedback, I give *Youthage Culinary* Program Inc. permission to use that feedback on their website or other promotional materials.

I understand that this is the entire agreement between *Youthage Culinary Program Inc.* , 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 *Youthage Culinary Program Inc.* I agree that this Agreement shall be governed and interpreted under Illinois 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 my Child, as well as his/her heirs and assigns, who will be bound by all of its terms.

Name of Class/Event:

Name(s) of Child(ren):

Signature:

(Parent or Guardian if under age 18)

Date: