



## Children's Cooking Class Registration Form

Name of Child:	Birthdate:	Age:						
Parent and/or Legal Guardian Nam	ne:	Relation:						
Phone:	Email:							
Event Name:	Event Date(s):							
Allergies and Food Restrictions (re	equired):							
guarantee that there has not been	vironment. We do not use nuts during ou cross-contamination. If your child has an uch as gluten free, halal, lactose intolerand							
If your child has no allergies or foo	od restrictions, write "None" below.							
Note that Longo's cannot hold on	s an EpiPen with themYesNo _ to or store EpiPens. EpiPens must remain	with the child						
Name:	on (MUST be available during Event	hours):						
	Neiduoii.							
Name	permission to pick-up my Child:  Relationship	Phone						
NOTE: Pro	oof of identity will be required for verif							
2. I authorize my Child to leave a	after the Loft Event without adult supervis	sion Yes No						
Parent/Guardian Acknowledg	ements:							
consent for my Child to obtai to administration of an EpiPe Child.	nt that my Child requires emergency medin any emergency medical attention that none, admission to hospital, as deemed neco	dical treatment and I cannot be reached, I may be required, including, but not limited essary, for the care and well-being of my photograph and / or videotape my Child						
while participating in the Even	t for use in any future promotional materi	al.						
By signing below, I acknowledge tha	t I have read, understood and agree to the	e information above.						
Parent and/or Legal Guardian Signal	ture	 Date						





## Release of Liability and Waiver Form

(One Form Filled Out Per Child)

By signing this Release of Liability and Waiver Form (the "Form"), I represent that it is my desire and intent that the child identified below ("my Child") participate in Longo Brothers Fruit Markets Inc. ("Longo's") cooking classes, events and/or parties (the "Event") that is age appropriate. I also represent that I have the full authority to sign this Form on behalf of my Child as the Child's parent or legal guardian.

I acknowledge that the participation of my Child in the Event, 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 I, I expressly and voluntarily assume any and all risks associated with participation in the Event and, furthermore, any and all risks associated with the consumption of the food prepared during the Event. 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 during the Event. I understand my Child will be exposed to a variety of foods and may be working with cooking tools and appliances with supervision.

I acknowledge that Longo's is not an allergy-free environment and that Longo's cannot guarantee the Loft will be free of allergens even if a specific ingredient is not listed on the menu for the Event. While Longo's will take reasonable steps to avoid giving my Child something to eat that is contrary to their allergy or dietary needs, Longo's cannot guarantee that my Child won't be exposed to or consume something that they may be allergic to. I understand reasonable substitutions or omissions will be made to accommodate my Child's needs, however, Longo's may not be able to modify the stated menu items to the extent that my Child may enjoy all the food that is prepared. I further understand that there may be alternations to the schedule or menu due to availability of ingredients, etc.

In consideration for my Child being permitted to attend and participate in the Event and any and all of the activities that are or might be associated with the Event, on my Child's behalf, and also on my own behalf, I release and further agree to indemnify, defend and hold harmless Longo's, including its parent, subsidiary and affiliates and their respective officers, directors, shareholders, members, managers, employees and agents, and their respective successors and assigns, from any and all claims, demands, actions, causes of action, lawsuits, expenses or losses (including legal 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 the Event or any related activities.

Longo's is committed to creating and maintaining an environment characterized by mutual trust and the absence of intimidation, discrimination, oppression and exploitation. Longo's will not tolerate discrimination of any kind, including but not limited to discrimination – on the basis of, age, sex, sexual orientation, race, national origin, religion or disability – as well as sexual or psychological harassment, or violence. Longo's will take appropriate and immediate action in response to complaints or knowledge of violations and as such, I understand that my Child will be removed from the Event if found in violation of this paragraph.

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 Child:							_ Age:			

Signature of Parent and/or Legal Guardian: Date:

I acknowledge that I have read and understand this Form, which affects my Child's and my legal rights, and I