

# the *Chef* upstairs

## Winter 2012 - Cooking Classes for Kids (Jan. 7<sup>th</sup> to March 3<sup>rd</sup>)

### Location:

The Chef Upstairs is located at 516 Mount Pleasant Drive, just north of Davisville on the west side. Entrance is a blue door next to the bakery '**Half Baked Ideas**'. If you need directions, please call us at 416.544.9221. A map is also available at: <http://thechefupstairs.com/contact.html>

### Class Schedule

Cooking Classes for Kids run from 1 pm to 2:30 pm on Saturday afternoons from January 7 to March 3, 2012. No class on February 18<sup>th</sup> due to Family Day.

### Materials Fee:

All materials & ingredients are included in the price of each class. The price is \$425 plus +HST for the session (8 classes) or \$65+HST per class

### Contact Information:

The Chef Upstairs 416.544.9221

Owner/Manager: Greg Heller- [greg@thechefupstairs.com](mailto:greg@thechefupstairs.com)

Chef – Michelle Curnock [michelle@cookingtoronto.com](mailto:michelle@cookingtoronto.com)

### Illness and/or Injury / Health Conditions

Parents/guardians should not send their child to class if they are ill. Parents/guardians must complete a medical permission slip before The Chef Upstairs staff can Administer any medication to a child. Parents will be expected to pick up, as soon as possible, a child that becomes ill or injured at *The Chef Upstairs*. Also, please let the *The Chef Upstairs* know on the Parental Consent Form of any health conditions and related medications.

**Allergies:** *Please note that due to severe allergies, we cannot allow nuts of any Kind (including their products, such as peanut butter) into the studio. Thank you for your Co-operation. Staff should also be informed as to whether an auto-injector may be required if you have a child who is anaphylactic.*

**Emergency Transportation Policy**

If at any time, due to circumstances such as injury or sudden illness, medical treatment is necessary, I (we) authorize the staff of *The Chef Upstairs* to take whatever emergency measures are necessary for the protection of my (our) child while in their care. I understand that this may involve applying first aid, calling a physician or nurse, carrying out the instructions given, and/ or transporting my (our) child to a hospital, including the possible use of an emergency vehicle. I understand that this may be done prior to contacting me (us) and that any expenses incurred for such treatment, including emergency transportation, is my (our) responsibility.

**Refund/ Withdraw Policy**

Participants wishing to withdraw from classes must do so in person; by telephone or in writing ([events@thechefupstairs.com](mailto:events@thechefupstairs.com)). A 100% refund of the cost will be issued if requested 5 business days prior to the start date of classes. The fee is non-refundable 5 days prior to the start date of the classes. Participant substitutions may be made prior to the start date of the course. Refunds cannot be granted for days missed. Registration will only be accepted with payment.

# ***Cooking Classes for Kids***

## **Parental/Guardian Consent Form**

Please Circle Classes Dates:

January 7; 14; 21; 28; February 4; 11; 25; March 3

### **PARTICIPANT INFORMATION**

Child's Name:

Phone:

Birth date:

Home Address:

### **GUARDIAN INFORMATION**

**Parent/ Guardian #1 Name:**

Relationship to child:

Home phone:

Work phone:

Email:

**Parent/ Guardian #2 Name:**

Relationship to child:

Home phone:

Work phone:

Email:

### **Emergency Information:**

Emergency Contact Person & Relationship to child:

Home phone:

Work phone:

Email:

Does your child have any special physical, mental, or emotional conditions and/or medications that we should be aware of? Please explain (attach another sheet if necessary, or feel free to contact us to discuss further):

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**By signing below** you are indicating that you have read and **agree to all of the policies stated in this document.** In consideration The Chef Upstairs accepting the above minor as a participant in our program and allowing them to enjoy the facilities of the The Chef Upstairs Cooking Classes for Teens, the undersigned parent or guardian on behalf of him/herself and on behalf of the minor applicant, does waive and release each and every right or claim we and each of us have or may have against The Chef Upstairs, its agents, employees, or representatives for all and any injuries, accidents, or mishaps occasioned by or to above named minor while participating in the activities of or in the care of The Chef Upstairs.

**Signature of Parent/ Guardian(s):**

\_\_\_\_\_  
\_\_\_\_\_

**Date:** \_\_\_\_\_

**Payment Type:**

\*we accept cheque/debit on the first day of class but we require a Credit Card to hold your child's spot in the program.

- Cheque**
- Debit**
- Credit Card (Visa, Master Card, American Express)**

Name on card: \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiry: \_\_\_\_\_

## THE CHEF UPSTAIRS PHOTO RELEASE

### Parent/Guardian Consent

I hereby consent to allow The Chef Upstairs to take photos of the above noted child which may be posted on The Chef Upstairs website or other promotional materials. These photos will not be sold or released to any outside agency.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

### How did you find out about Teen Cooking Classes

**(Please check all that apply.)**

- Help We've Got Kids
- Hand-out
- Newspaper
- Web Search
- Radio
- Poster
- Hand-out
- Word of mouth
- The Chef Upstairs Website Headline Banner
- The Chef Upstairs e-Blast Newsletter
- Other: \_\_\_\_\_

### If mailing this form, please return last three pages to:

The Chef Upstairs  
Attn: Teen Classes  
516 Mount Pleasant Rd  
Toronto, Ontario  
M4S 2M2