



AFTER SCHOOL CAMP FOR KIDS (age 5+)

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 a bakery called '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>

Camp Schedule

The After School Camp for Kids runs from 3:15. to 6:00pm.

Pick Up and Drop Off:

The Chef Upstairs will provide transportation to pick up kids from their designated schools and bring them to The Chef Upstairs Cooking Studio. Pick – up is at 6:00pm. Again, **please have your child's name checked-off and sign the attendance list upon leaving (or let us know that your child is taking the TTC).** If you are running late or your child will not be attending camp a certain day, please call and let us know at 416.544.9221.

Contact Information:

The Chef Upstairs 416.544.9221

Event Coordinator: Carolyn Potter- sales@thechefupstairs.com

Illness and/or Injury / Health Conditions

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After School Camp for Kids

Parental Consent Form

Please check your desired semester:

- Jr. Chef 101 (Sept 7th – Jan 24th) Jr. Chef 102 (Jan 31st – June 24th)

PARTICIPANT INFORMATION

Child’s Name:

Phone:

Birth date:

Home Address:

GUARDIAN INFORMATION

Parent/ Guardian #1:

Relationship to child:

Home phone:

Work phone:

Email:

Parent/ Guardian #2:

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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Signature of Parent/ Guardian(s):

Date: _____

Payment Type:

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

Name on card: _____

Card Number: _____

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Signature: _____

Date: _____

How did you find out about the After School Camp?

(Please check all that apply.)

- The Chef Upstairs Calendar
- Hand-out
- Newspaper
- Radio
- Poster
- Hand-out
- Word of mouth
- E-Daily
- Other: _____

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

The Chef Upstairs
Attn: Carolyn Potter
516 Mount Pleasant Rd
Toronto, Ontario
M4S 2M2



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Phone:

Birth date:

Home Address:

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Relationship to child:

Home phone:

Work phone:

Email:

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Relationship to child:

Home phone:

Work phone:

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Emergency Information:

Emergency Contact Person & Relationship to child:

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Toronto, Ontario
M4S 2M2



AFTER SCHOOL CAMP FOR KIDS (age 5+)

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 a bakery called '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>

Camp Schedule

The After School Camp for Kids runs from 3:15. to 6:00pm.

Pick Up and Drop Off:

The Chef Upstairs will provide transportation to pick up kids from their designated schools and bring them to The Chef Upstairs Cooking Studio. Pick – up is at 6:00pm. Again, **please have your child's name checked-off and sign the attendance list upon leaving (or let us know that your child is taking the TTC).** If you are running late or your child will not be attending camp a certain day, please call and let us know at 416.544.9221.

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The Chef Upstairs 416.544.9221

Event Coordinator: Carolyn Potter- sales@thechefupstairs.com

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After School Camp for Kids

Parental Consent Form

Please check your desired semester:

- Jr. Chef 101 (Sept 7th – Jan 24th) Jr. Chef 102 (Jan 31st – June 24th)

PARTICIPANT INFORMATION

Child's Name:

Phone:

Birth date:

Home Address:

GUARDIAN INFORMATION

Parent/ Guardian #1:

Relationship to child:

Home phone:

Work phone:

Email:

Parent/ Guardian #2:

Relationship to child:

Home phone:

Work phone:

Email:

Emergency Information:

Emergency Contact Person & Relationship to child:

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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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Signature of Parent/ Guardian(s):

Date: _____

Payment Type:

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Name on card: _____

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THE CHEF UPSTAIRS PROMOTIONS

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Date: _____

How did you find out about the After School Camp?

(Please check all that apply.)

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- Hand-out
- Newspaper
- Radio
- Poster
- Hand-out
- Word of mouth
- E-Daily
- Other: _____

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The Chef Upstairs
Attn: Carolyn Potter
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AFTER SCHOOL CAMP FOR KIDS (age 5+)

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After School Camp for Kids

Parental Consent Form

Please check your desired semester:

- Jr. Chef 101 (Sept 7th – Jan 24th) Jr. Chef 102 (Jan 31st – June 24th)

PARTICIPANT INFORMATION

Child's Name:

Phone:

Birth date:

Home Address:

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Relationship to child:

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Emergency Information:

Emergency Contact Person & Relationship to child:

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AFTER SCHOOL CAMP FOR KIDS (age 5+)

Location:

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After School Camp for Kids

Parental Consent Form

Please check your desired semester:

- Jr. Chef 101 (Sept 7th – Jan 24th) Jr. Chef 102 (Jan 31st – June 24th)

PARTICIPANT INFORMATION

Child's Name:

Phone:

Birth date:

Home Address:

GUARDIAN INFORMATION

Parent/ Guardian #1:

Relationship to child:

Home phone:

Work phone:

Email:

Parent/ Guardian #2:

Relationship to child:

Home phone:

Work phone:

Email:

Emergency Information:

Emergency Contact Person & Relationship to child:

Home phone:

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Toronto, Ontario
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AFTER SCHOOL CAMP FOR KIDS (age 5+)

Location:

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After School Camp for Kids

Parental Consent Form

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PARTICIPANT INFORMATION

Child's Name:

Phone:

Birth date:

Home Address:

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Relationship to child:

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Emergency Contact Person & Relationship to child:

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AFTER SCHOOL CAMP FOR KIDS (age 5+)

Location:

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- E-Daily
- Other: _____

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

The Chef Upstairs
Attn: Carolyn Potter
516 Mount Pleasant Rd
Toronto, Ontario
M4S 2M2



AFTER SCHOOL CAMP FOR KIDS (age 5+)

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 a bakery called '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>

Camp Schedule

The After School Camp for Kids runs from 3:15. to 6:00pm.

Pick Up and Drop Off:

The Chef Upstairs will provide transportation to pick up kids from their designated schools and bring them to The Chef Upstairs Cooking Studio. Pick – up is at 6:00pm. Again, **please have your child's name checked-off and sign the attendance list upon leaving (or let us know that your child is taking the TTC).** If you are running late or your child will not be attending camp a certain day, please call and let us know at 416.544.9221.

Contact Information:

The Chef Upstairs 416.544.9221

Event Coordinator: Carolyn Potter- sales@thechefupstairs.com

Illness and/or Injury / Health Conditions

Parents/guardians should not send their child to camp if s/he is 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 a Camp Day must do so in person; by telephone or in writing to Carolyn (sales@thechefupstairs.com). A 100% refund of the cost will be issued if requested 5 business days prior to the start date of the camp. The fee is non-refundable 5 days prior to the start date of the camp. Participant substitutions may be made prior to the start date of the term. Refunds can not be granted for days missed. Registration will only be accepted with payment.

After School Camp for Kids

Parental Consent Form

Please check your desired semester:

- Jr. Chef 101 (Sept 7th – Jan 24th) Jr. Chef 102 (Jan 31st – June 24th)

PARTICIPANT INFORMATION

Child's Name:

Phone:

Birth date:

Home Address:

GUARDIAN INFORMATION

Parent/ Guardian #1:

Relationship to child:

Home phone:

Work phone:

Email:

Parent/ Guardian #2:

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):

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 After School Camp for Kids , 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 PROMOTIONS

Parent/Guardian Consent

I hereby consent to allow The Chef Upstairs to take photos of the above noted child for The Chef Upstairs promotional purposes only.

Signature: _____

Date: _____

How did you find out about the After School Camp?

(Please check all that apply.)

- The Chef Upstairs Calendar
- Hand-out
- Newspaper
- Radio
- Poster
- Hand-out
- Word of mouth
- E-Daily
- Other: _____

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