

Look What's Cookin' at ECA (the Episcopal Church in Almaden)
Let's Get Cookin' Around the World

A Cooking Camp for Kids having completed 1st thru 5th grades
June 10 thru 14 from 9 AM to 12 Noon
June 15th Required Event 4 PM to 6:30 PM
(Chefs will be providing a "tasting menu" of their creations)



Completed Registration Form & Tuition Secures Enrollment
Very Limited Enrollment

Mother's Name: _____ Home Phone: _____

Father's Name: _____

Address: _____ Daytime Phone: _____

City: _____ Zip: _____ Daytime Phone 2: _____

Email address preferred to receive updates: _____

How did you hear about this program? _____

1. **Child's Preferred Name to be called:** _____ Age: _____ Sex: _____

Birthdate: _____ Grade Completed: _____ School: _____ T-shirt Size S M L XL

Does your child have any special needs that we should be aware? _____yes _____no

Please explain _____

Any Food Allergies _____

Important: This class is for children having completed 1st grade thru 5th grade. All participants must be able to attend the family event Saturday, June 15th following our camp week. Our chefs will be providing a "tasting menu" to show off their culinary talents.

How many from your family will be attending our Saturday Family Event? _____

Cost for this camp: \$100 per chef

Make your check payable to: ECA (The Episcopal Church in Almaden) and please note on the memo line **Look What's Cookin'**. Please check dates to be sure you can attend the required Saturday event.

Mail or deliver your registration form and check to: 6581 Camden Ave. San Jose, 95120.
Registration is only secured by payment and a completed registration form.

A medical release form is also needed. We will keep this form on file for the remainder of 2019. A new form is required each calendar year. Medical Release Form is on the reverse side of this form.

The Episcopal Church in Almaden – 6581 Camden Ave. San Jose, CA 95120 – 408-268-0245
Children and Youth Programming Medical Release
Episcopal Church in Almaden
2019 Programs

I give my permission for my child/children (list their names) _____ to participate in the Children and Youth Programming at the Episcopal Church in Almaden (ECA). In the event of an emergency, I may be reached at:

Phone Number: 1) _____ 2) _____

Other emergency contact persons:

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

Primary Physician: _____ Phone: _____

Health/Hospitalization Insurance: _____ Policy/Group # _____

Address: _____ Phone: _____

In the event of an emergency where medical treatment is required, and I or named contacts are unable to be reached by phone, I authorize the church staff sponsors of this event to obtain the services of a licensed physician. Please attempt to notify me immediately concerning any such emergency.

Please list any allergies, medications, or other medical information needed in an emergency situation for your child(ren).

_____ Yes, I have this information already on file with ECA for 2019 and have not changed any of our medical information since first completing this form.

Signature of Parent or Guardian: _____

Date: _____

We will keep this form on file for the year stated above. We will require a new form each year. We will request such a form from you at registration of the first program that your child or children register during any given year. This form will remain in effect for the calendar or until such time you need to change the form due to a change in your insurance. On future registration forms you will be required to acknowledge that your insurance plans have not changed during that calendar year.