Jr Iron Chef VT
Parent Permission and Release Form

This form **MUST** be completed by the parent/guardian of **each student** who participates in Jr Iron Chef VT. Mail completed forms to **Amy Gifford, Jr Iron Chef VT, PO Box 697, Richmond, VT 05477** by February 15, 2016.

Student Name:

School: _____ Grade: _____

Student Address:

Parent/Guardian Name:

Parent/Guardian Phone Number(s):

Coach Name: _____ Emergency Contact Name: _____

Emergency Contact Phone Number(s):

VT Food Education Every Day (VT FEED) and all organizers of Jr Iron Chef VT will exercise reasonable judgment and care in the planning and operation of the event. I understand and agree that VT FEED nor any affiliated parties will not be liable for injuries resulting from accidents or unanticipated occurrences beyond their control. I also understand and accept that volunteers, including other parents, as well as other members of the community will be assisting in overseeing the Jr Iron Chef VT Competition.

In case of illness or accident, I request the organizers of the event to contact me. If I cannot be reached or the emergency contact person cannot be reached at the phone numbers provided, I authorize the organizers of Jr Iron Chef VT to seek emergency medical care or take other action they believe is necessary to protect the best interest of my child/ward. If my child/ward is taken for emergency medical treatment, I hereby authorize the attending physician to administer the emergency treatment s/he believes is appropriate, and I agree to pay any resulting expenses.

I have read the above form and my signature below demonstrates I have provided my consent for my child/ward to participate in the Jr Iron Chef VT Competition.

_____   _____
Parent/Guardian Signature   **Date**

The Jr Iron Chef Competition is a public event that will be covered by the media. By taking part in this event, I understand that my child/ward may be videotaped, photographed, interviewed and/or included in written materials.

_____   _____
Parent/Guardian Signature   **Date**