



Child Health Pavilion Food Demonstration Kitchen
Participation Waiver and Release Form

General Information:

The food demonstration kitchen is where patients and families from the community can learn hands-on cooking skills, receive nutrition education, and taste recipes they prepare. This interactive demonstration kitchen is an educational opportunity for families to engage, practice and build skills needed to eat healthy.

Please read, and if you agree to the statement, please sign and date at the bottom of the page.

Participation Waiver

Liability Waiver:

I understand that my participation in the demonstration kitchen is voluntary may involve a risk of personal injury or loss or damage to property, including, but not limited to: cuts, slips, falls, burns, allergic reactions, foodborne illness and other injuries as a result of activities, products and equipment used. I acknowledge that there are certain risks associated with participating in the demonstration kitchen. I acknowledge that not all risks can be prevented and I voluntarily assume all risks of injury to myself. In consideration for being granted the opportunity to participate in this program, I agree to hereby release, and to hold harmless Dayton Children's, its Board of Trustees, Child Health Pavilion, food demonstration kitchen agents, representatives, employees and volunteers from any and all claims and liability for losses, damages, injuries or costs of any kind that might arise related to my participation in the program, including those based in negligence.

I acknowledge that Dayton Children's does not provide health and accident insurance for food demonstration kitchen participants and that I am responsible for the payment of any and all costs or expenses in the event of accident, illness or injury.

By signing below, I agree that I am at least 18 years of age and that I have read this agreement and fully understand its contents. I am aware that signing this agreement constitutes a release of liability and I sign it of my own free will.

Print Your Name: _____ Sign Your Name: _____

Child's Name: _____

Date of Signature: _____

This is the entire agreement with respect to the subject matter herein, and supersedes all prior written or oral understandings or agreements. This is binding on beneficiaries, heirs, successors and assigns. Everything herein is governed by the laws of Ohio with venue in federal and state courts of Montgomery County, Ohio and I hereby consent to such court's jurisdiction.