

Kid's Cooking Winter/Spring Workshop



For Children Currently ages 5-12
Wednesdays, 4:00–5:00PM
Community Center Activity Room
289 South Maple Ave, Basking Ridge
Instructor: Gail Paul



Session I: February 8th—March 14 (*no program 2/22*)
Session II: March 21—April 25 (*no program 4/11*)
Space is limited to 20 participants per session

Menu: Healthy Kid Friendly Recipes! Being able to prepare food on their own gives children a sense of self esteem and it will also get them to try different foods. For the length of this course children will be learning food groups, kitchen safety, kitchen tools and how to use them. They will be learning the importance of fruits and veggies. This course will be teaching them basic cooking skills while learning the math and science that goes along with it.
 We are 100% peanut free. All new recipes for the Winter/Spring Workshop

Cost: \$75 per participant, per session. Residents only.

Refunds must be requested prior to the first class of each session, minus \$10 processing fee.

You must be registered with the Recreation Department prior to attending an activity. If your household is new, inactive, or missing pertinent information you will need to complete a Household Information Form before registering for an activity.

Online Registration: Visit www.bernards.org. Call 908-204-3003 to request your User Name and Password.

In-Person or Mail-In Registration: Complete the form below and return with check made payable to "Bernards Township" to Parks & Recreation, 1 Collyer Lane, Basking Ridge, NJ 07920.

Recreation program schedule subject to change.

Bernards Township Department of Parks & Recreation

908-204-3003



www.bernards.org

Winter/Spring 2012 Kid's Cooking Workshop—REGISTRATION FORM

Complete one form per child, per program and submit check payable to "Bernards Township".

Return to: Bernards Township Recreation, 1 Collyer Lane, Basking Ridge, NJ 07920.

I would like to register for (please circle): Session I-\$75 Session II-\$75 Both Sessions-\$150

Last name: _____ First name: _____ Male or Female: _____

Address: _____

Town: _____ Zip: _____

Birth date: ____/____/____ Grade: _____ School child attends: _____

As the Parent or Guardian of the participant in this program, I hereby give permission for my child/dependent to participate in this program and agree that this is a voluntary choice. I acknowledge that there are certain risks inherent in participation in this activity, and I agree to accept all of the consequences and assume the risks involved in participation. I give permission to the Township to provide emergency care as necessary for the well being of my child/dependent until such time as I may be contacted. I understand and acknowledge that Bernards Township is not responsible for any loss, damages or injury to any person or property for any reason associated with my child's/dependent's participation in this activity. In light of the above, I hereby agree to indemnify and hold harmless and release Bernards Township from any and all liability for any and all injuries my child/dependent may sustain as a result of participation in this activity. This includes, but is not limited to, responsibility for the payment of any and all doctor, medical or hospital bills resulting from any and all injuries to my child/dependent. I grant Bernards Township the right to use any and all photographs of myself or my child participating in a Department sponsored activity for future media promotion. I confirm that I have read and understand the Recreation Department's registration policies and procedures.

For office use only: Cash _____ Ck. # _____ Received: _____