



## Cooking Liability Waiver and Release Form

### Participant Information

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Email: \_\_\_\_\_

### Emergency Contact Information

Name: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Relationship: \_\_\_\_\_

### #Liability Waiver and Release

I, \_\_\_\_\_, wish to participate in a cooking class offered by instructor Cristin Rodriguez, and Way Finder Fitness LLC/Way Finder Tribe.

I acknowledge that my participation in this activity is voluntary and I understand and agree to the following:

#### 1. Assumption of Risk:

- I understand that participating in cooking activities involves inherent risks, including but not limited to, risks of injury, illness (including foodborne illness), burns, cuts, allergic reactions, and other injuries from handling cooking equipment and ingredients.
- I voluntarily assume all risks associated with my participation in these activities.

#### 2. Health and Safety:

- I certify that I am physically and mentally fit and have no medical condition that would prevent my full participation in these activities.
- I agree to inform the instructor of any allergies, physical or mental limitations, disabilities, or conditions that may affect my ability to participate in the class.
- I acknowledge that I am responsible for informing the instructor of any known allergies to ingredients used in the class.

#### 3. Release of Liability:

- I release, waive, discharge, and hold harmless Cristin Rodriguez, Way Finder Fitness LLC/Way Finder Tribe, its officers, agents, employees, and volunteers from any and all liability, claims, demands, actions, and causes of action whatsoever arising out of or related to any loss, damage, or injury, including death, that may be sustained by me while participating in these activities, whether caused by the negligence of the releasees or otherwise, including but not limited to injuries resulting from the use of cooking utensils, equipment, or ingredients.

#### 4. Indemnification:

- I agree to indemnify and hold harmless Cristin Rodriguez, Way Finder Fitness LLC/Way Finder Tribe, its officers, agents, employees, and volunteers from any loss, liability, damage, or costs, including court costs and attorney fees, that they may incur due to my participation in these activities.

#### 5. Property Damage:

- I acknowledge that I am responsible for any damage to equipment, facilities, or personal property that occurs as a result of my actions or negligence during participation in these activities.

#### 6. Food Handling and Consumption:

- I understand that I am responsible for my own safe handling, preparation, and consumption of any food products used or produced during the class.
- I acknowledge that any food prepared during the class is consumed at my own risk, and I release the Releasees from any liability resulting from the consumption of such food.

#### 7. Compliance with Instructions:

- I agree to comply with all safety instructions and guidelines provided by the instructor. Failure to follow these instructions may result in my removal from the class without refund.

#### 8. Photography/Video Release:

- I grant permission for the use of my image and likeness in any photographs or videos for promotional or educational purposes without compensation.

#### 9. Governing Law:

- This agreement shall be governed by and construed in accordance with the laws of the state of New York.

#### 10. Severability:

- If any provision of this waiver is found to be invalid or unenforceable, the remaining provisions will continue to be valid and enforceable.

#### 11. Acknowledgment of Understanding:

- I acknowledge that I have read this waiver and release of liability, fully understand its terms, and understand that I am giving up substantial rights, including my right to sue. I acknowledge that I am signing the agreement freely and voluntarily, and intend by my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law.

Participant's Signature (Hand signature required): \_\_\_\_\_

Date: \_\_\_\_\_

Parent/Guardian Signature (Required regardless of age) (Hand signature required) (If applicable): \_\_\_\_\_

Date: \_\_\_\_\_