

If you are interested in your child attending this **FREE** week long program, please complete this form and return to your child's teacher by May 16. Transportation can be provided.

## REGISTRATION IS FREE



**What:** Culinary Camp      **Who:** Current 3<sup>rd</sup> – 8<sup>th</sup> Grade Students

**When:** Grades 3 – 5 June 12 - 16    Grades 6 – 8 June 26 - 30

**Where:** DACC, Bremer Conference Center    **Why:** Cooking is Fun!

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### PARENT/PARTICIPATION INFORMATION

Parent/Guardian Name (s) \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell/Alternate Phone \_\_\_\_\_ Email \_\_\_\_\_

Child's Name \_\_\_\_\_

Child's Date of Birth \_\_\_\_\_ Male  Female  Fall Grade Level \_\_\_\_\_

Special Needs: \_\_\_\_\_

Food/Other Allergies/ Diabetic Needs \_\_\_\_\_

Does your child require an EpiPen®?  Yes  No

Medication Needs: \_\_\_\_\_

School Child Attends \_\_\_\_\_

Does your child need transportation to camp?  Yes  No

To which racial or ethnic group (s) do you mostly identify?  African-American  Caucasian

Asian/Pacific Islander  Latino/Hispanic  Native American  Other \_\_\_\_\_

How did you hear about Culinary Camp? \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Completion of this form does not guarantee placement in the camp. Spaces are limited and placement will be determined via drawing.**