



110 Pleasant Street N.W.
Vienna, VA 22180
(703) 865-7920 phone

www.culinariacookingschool.com

2024 Summer Camp Application Form

Each child in a family requires his or her own application form. Complete all sections and mail with payment to: Culinaria Cooking School, 110 Pleasant Street, NW, Vienna, VA 22180. Please include any comments about your child that may be helpful to the instructors on a separate sheet.

Camper:

Last	First	Nickname
Date of Birth (mm/dd/yy)	Age	Entering Grade in Fall

Parent/Guardian:

Last	First	Relationship
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Home Address: Street

City/State/Zip

Phone Numbers:

Daytime (Home or Work)	Cell
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E-Mail Address:

(Used for Camp Enrollment Confirmation and/or Notifications)

Emergency Contact:
(Other than Parent)

Name	Relationship to Child	Phone Number
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Medical:

List any food allergies and/or dietary restrictions.

Release from Camp:

I authorize my child may be picked up from camp by:

☐ Parent: _____

☐ Other: _____

Select the desired camp session. Use the Priority column if you'd like to indicate 1st, 2nd or 3rd choice of camp sessions. **Each child in a family requires his or her own application form.**

Week of	Time	Camp Session	Instructor
June 24 – 28	9:30am - 12:30 pm	<i>Olive the Mediterranean</i>	Brian Batsel
June 24 - 28	2:00 - 5:00pm	<i>Olive the Mediterranean</i>	Brian Batsel
July 1 – 3 (mini)	9:30am - 12:30 pm	<i>Summer Picnics</i>	Viviana Alvarez
July 1 – 3 (mini)	2:00 - 5:00 pm	<i>Summer Picnics</i>	Viviana Alvarez
July 8 - 12	9:30am - 12:30 pm	<i>I can Make Dinner!</i>	Brian Batsel
July 8 – 12	2:00 - 5:00pm	<i>I Can Make Dinner!</i>	Brian Batsel
July 15 - 19	9:30am - 12:30 pm	<i>Bakes from Around the World</i>	Viviana Alvarez
July 15 - 19	2:00 - 5:00pm	<i>Bakes from Around the World</i>	Viviana Alvarez
July 22 – 26	9:30am - 12:30 pm	<i>Family Classics</i>	Viviana Alvarez
July 22 - 26	2:00 - 5:00pm	<i>Family Classics</i>	Viviana Alvarez



2024 Summer Camp Release Form

Camper:

Last

First

Nickname

Shirt Size (Circle One): **Adult S (equiv to Child L)**

Adult M

Adult L

If no shirt size is indicated, Adult M will be ordered.

Payment Method: \$550/camper/session \$330/camper/mini session

Payment Amount Enclosed: \$ _____

☐ Credit Card: (See last page for CC Authorization Form)

☐ Check Number: _____

☐ Cash

Parent Permission

I understand that my child will be in a commercial kitchen that does not have the same features and safeguards as a home kitchen. He or she will be around high heat elements including ovens and cooktops and will be taught to use kitchen tools with sharp implements including knives and blenders. I agree that Culinaria Cooking School, its Officers, Administrators, employees, and staff are not responsible or liable for accidents, loss, damage, death, delay or expense arising from acts of God, terrorism, wars, strikes, quarantine, weather irregularity, equipment failure, vehicle accidents, government restrictions or regulations, nor is responsible for illness from food or otherwise, detention, assault, theft or criminal activity or annoyance. I agree to release and hold harmless Culinaria Cooking School, its officers, trustees, agents, and employees, and agree to indemnify each of them from any and all claims, cost suits, actions, judgments and expenses, upon any damage, loss or injury to my child or damage to my child's property arising out of my child's participation in this activity. _____ Initials

Cancellation Policy

I understand that Culinaria may cancel a camp session due to low attendance, and if so I will be notified and offered a full refund or a seat in another session, if available. I understand that if I need to cancel my child's seat, any refund is subject to the cancellation/refund policy that has been outlined. _____ Initials

Camper's Code of Conduct

All campers must follow the code of conduct to ensure a safe and fun learning environment. I acknowledge that I have read and reviewed the camper's code of conduct with my child. _____ Initials

Dress Code

All campers must follow the dress code to ensure a safe learning environment. I acknowledge that I have read and reviewed the dress code with my child. I am aware that my child may be excluded from camp activities if the proper clothing/shoes are not worn. Exclusion from camp activities due to improper attire will not result in a refund of camp fees. _____ Initials

Medical Treatment

I give my permission to the staff at Culinaria Cooking School to administer first aid for minor cuts or burns. In the event of a serious injury, Culinaria will contact emergency medical personnel immediately. I hereby give my permission for transport and treatment at a local hospital. Parents will be notified about all injuries at camp. **List any food related allergies or Issues:** _____

_____ Initials

Photo Release

I give permission for my child's image to be used in Culinaria Cooking School publications, video, online pictures including social sites (Facebook, etc.) and possibly in third party publications and media (e.g., local newspapers and television) covering Culinaria Cooking School. _____ Initials

By initialing the permissions and releases above, I acknowledge that I have read and agree to each item.

Parent/Guardian Signature (required)

Date



Credit Card Authorization:

Payment Amount: \$_____

Credit Card (circle one): VS MC AE

Name on Card: _____

Billing Address (if different from Home Address):

Street Address

City

State

Zip Code

Card Number: _____

Expiration Date: _____

Security Code: _____

☐ I authorize Culinaria Cooking School to charge the amount listed above to this card.

If placed on waitlist, payment will be processed when a space becomes available.