

# On the Road to Healthy Living Registration

For optimum accuracy, please print in capital letters and avoid contact with the edge of the box.

A	B	C	D	E	F	G	H	I	J	K	L	M
N	O	P	Q	R	S	T	U	V	W	X	Y	Z

Please complete all of the information below:

First Name:

Last Name:

Address:   
 (use second line if needed)

City:

State:  Texas  Other:  Zip Code:

County:

Email:   
 (continue on second line if needed)

Phone: (    )   -

**IMPORTANT: Generate a Personal ID Code:**

Your first and last initials and the last 4 digits of your home phone.

Please generate your personal ID code which is composed of first and last initial and the last 4 digits of your phone number (cell or home), and write in the boxes. For example, if your name is John Smith and your phone number is 555-4433, you would write JS4433.

The code allows us to keep your responses to surveys confidential. You'll be given these instructions again when the code is requested in the future.

Is this your first year to participate in a Texas A&M AgriLife Extension activity?  Yes  No



Please continue on the other side.



# ON THE ROAD TO HEALTHY LIVING MOBILE COOKING SCHOOL

## PARTICIPATION WAIVER AND RELEASE

Name: \_\_\_\_\_

**Activity Description:** The "On the Road to Healthy Living" Mobile Cooking School provides instruction and hands on preparation of food to encourage participants to practice healthy choices.

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

### Participation and Liability Waiver

I want to participate in this activity, and recognize that this activity could present potential cooking hazards, including but not limited to: cuts, burns, slips, falls, allergic reactions, and other injuries because of activities, products, and equipment used. I release Texas A&M AgriLife Extension Service and my local hosting agency/site, their agents, representatives, employees, volunteers, and any sponsors from any and all damages, causes of action, claims, and liability that might arise from my participation in this activity.

Initials:

Parent / guardian initials (if participant is a minor)

### Media Release

I consent to and allow any use and reproduction by Texas A&M AgriLife Extension Service and my local hosting agency/site of any and all photographs or videotapes taken of me during their participation in this activity. I understand that Texas A&M AgriLife Extension Service and my local hosting agency/site will own the photographs and videotape and the right to use of reproduce such photographs or videotape in any media, as well as the right to edit them or prepare derivative works, for the purpose of promotion, advertising, and public relations. I hereby consent to this use of my name, likeness, or voice and I agree that such use will not result in any liability for payment to any person or organization, including myself.

Initials:

Parent / guardian initials (if participant is a minor)

I further acknowledge that I am at least 18 years of age.

I acknowledge the participant is under the age of 18 and has my permission to participate

Signature:

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

Signature of parent / guardian (if participant is a minor)

Name (please print): \_\_\_\_\_

Contact information in case of an emergency: \_\_\_\_\_

