



BREAK for a PLATE  
SCHOOLS

## Alabama Farm to School Junior Chef Parental Permission and Release Form

This form must be completed by the parent/guardian of **each student** who wishes to participate in the Alabama Farm to School Junior Chef Competition during the 2022-2023 school year. A completed form must be submitted by each team member along with their application on or before Tuesday, January 31, 2023, to Esther Hicks, CNP Education Specialist II, at [ehicks2@alsde.edu](mailto:ehicks2@alsde.edu).

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

School: \_\_\_\_\_ Grade: \_\_\_\_\_

Participant Address: \_\_\_\_\_

Participant Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Parent/Guardian Name: (Print) \_\_\_\_\_

Emergency Contact:	Name	Day Phone#	Evening Phone #
(Print)	_____	_____	_____

The Alabama State Department of Education (ALSDE), sponsors, and all organizers of the ALSDE Farm to School Junior Chef will exercise reasonable judgment and care in the planning and operation of the events. I understand and agree the ALSDE, sponsors, and affiliated parties will not be liable for injuries resulting from accidents or unanticipated occurrences beyond their control. I also understand and accept that volunteers, including other parents, as well as other members of the community will be assisting in overseeing the ALSDE Farm to School Junior Chef Competition.

In case of illness or accident, I request the organizers of the event to contact me. If I cannot be reached or the emergency contact person cannot be reached at the phone numbers provided, I authorize the organizers of the ALSDE Farm to School Junior Chef to seek emergency medical care or take other action they believe is necessary to protect the best interest of my child/ward. If my child/ward is taken for emergency medical treatment, I hereby authorize the attending physician to administer the emergency treatment believed appropriate for my child/ward, and I agree to pay any resulting expenses.

I have read the above form and my signature below demonstrates I have provided my consent for my child/ward to participate in the ALSDE Farm to School Junior Chef Competition.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The ALSDE Farm to School Junior Chef Competition is a public event that will be covered by the media. By taking part in this event, I understand and consent that my child/ward may be videotaped, photographed, interviewed and/or included in written materials.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_