



SHARE OUR STRENGTH'S
**COOKING
 MATTERS**
 NO KID HUNGRY

**Share Our Strength's Cooking Matters and Cooking Matters at the Store
 Participation Waiver and Release**



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

Participation Waiver

Liability Waiver: I want to participate in this Cooking Matters course and/or Cooking Matters at the Store tour and recognize that this course and/or tour could present hazards. I release **Share Our Strength & Oregon Food Bank**, its agents, representatives, employees, volunteers and any sponsors of Cooking Matters and/or Cooking Matters at the Store from any and all damages, causes of action, claims and liability that might arise from my participation in the course and/or tour program.

Initial _____

Information Waiver: I understand that any personal information I choose to provide **Share Our Strength & Oregon Food Bank** before, during or after this course and/or tour will be held in confidence. I do agree, however, that **Share Our Strength & Oregon Food Bank** may use and reproduce anonymously compiled survey results that could include any information I may have provided, for purposes of program evaluation, communication and publication.

Initial _____

Media Release

I consent to and allow **Share Our Strength & Oregon Food Bank** to use and reproduce any and all photographs or videotapes taken of me during my participation in this Cooking Matters course and/or Cooking Matters at the Store tour. I understand that **Share Our Strength & Oregon Food Bank** will own the photographs and video and the right to use or reproduce such photographs and videos in any media, and the right to edit them or prepare derivative works for purposes of promotion, advertising and public relations. I hereby consent to **Share Our Strength's & Oregon Food Bank's** use of my name, likeness or voice, and I agree that such use will not result in any liability to these parties for payment to any person or organization including myself.

Initial _____

I further acknowledge that I am at least 18 years of age. If under 18 years of age, signature of guardian is required.

Signature of Participant or Participant Guardian: _____

Name of Participant (please print): _____

Name of Participant Guardian (if applicable, please print): _____

Date: _____

Course/Tour Code ____ - _____