**grettie’s goodies Parent/Guardian Agreement**

**Baking**

* Students will practice knife safety and cutting techniques using 4-6 inch sharp chef knives.
* Students will practice oven and stove top safety. When it makes sense, they will place and remove products from the oven. When it makes sense, they will also work at the stovetop stirring and adding ingredients.
* We are not planning gluten free or dairy free classes. Please reach out if you would like these options added.

**Pick up**

* Please complete list below of all adults approved to pick up.
* If you’re running late, please call or text [(206) 819-8127](about:blank) with student’s name, adult expected, and ETA.
* Parents arriving 15-30 minutes late will be charged **$10 for late pickup.** Parents arriving later than 30 minutes will be charged $35. If parents are repeatedly late, we may suspend enrollment without refund.

**Snacks**

* Although we will be tasting food we ask that you please pack a **nut-free snack**for you child. We will begin each class with a short snack time.

**Safety**

* Safety of students is of highest priority.
* If a child is significantly injured, we will immediately call 9-1-1 as well as notify a parent or guardian. In the event of a natural or other disaster, students will remain under the direct care and supervision of Gretchen O’Connell until an authorized individual is able to check them out.

**Photographs**

* We plan to take photographs during class. We will send them to parents. We would also like to use them for promotional materials. If you do not want your child photographed or shared on our social media sites and marketing materials, please contact us at [info@grettiesgoodies.com](mailto:info@grettiesgoodies.com)

**Absences**

* For safety and security, please notify us if a student will be absent. please call or text [(206) 819-8127](about:blank) with student’s name and date of absence.
* Unfortunately, there are no refunds for days or weeks that students cannot attend. All students must be registered to attend the program; a friend cannot replace an absent student.

**Allergies**

* We do NOT adhere to a “nut-free” policy. However, we make every effort to minimize risk to vulnerable students. We do not have nuts in our kitchen. But we do have peanut butter.
* We have both wheat and other types of flour. We plan to mainly use wheat flour. We can discuss gluten free options if desired.
* We bake with eggs and dairy. However, we can discuss egg-free and non-dairy options.
* If your child has any food allergies, please note them on the form below. We will follow up with families on a case-by-case basis. Parents/guardians are responsible for providing any necessary medical supplies (e.g., EpiPen).

**Code of Conduct**

* Students are expected to maintain the same behavioral standard that they would have at school.
* If a child is consistently disruptive and prevents us from conducting class, we reserve the right to ask the child to drop the class. Parents will be given a formal warning before these measures are taken.



**WAIVER AND RELEASE OF LIABILITY**

In consideration of the opportunity for my child to attend the grettie’s goodies after school baking class noted above the undersigned ASSUMES ALL RISK associated with my child’s attending and participating in the classes, and WAIVES, RELEASES AND AGREES TO HOLD HARMLESS grettie’s goodies (gretties goodies, tiny teacups, and Gretchen O’Connell), and its respective agents, officers, board members, and volunteers (the Releasees) from any liability to the undersigned, and to the personal representatives, heirs, assigned, and family of the undersigned, for all loss or damages on account of injury to the person or property of the undersigned related to attendance at or participation in the classes, including any claims of damage or rights of action arising out of the use of the school’s premises for the classes, whether the alleged injuries or damages arise from the negligence of any of the releasees or not, to the fullest extent allowed by the law. This release includes, without limitation, any claims arising in negligence, other tort, or contact. The undersigned has read the Waiver and Release of Liability, understands its terms, and understands that by signing he or she is giving up certain rights he or she might otherwise have under law, and voluntarily signs.

By signing this form, parents/guardians agree to this waiver, give permission for their children to participate in grettie’s goodies activities per the Expectations that follow, and give permission to the adults in charge to seek emergency medical treatment and/or transportation for their children.

Student Name:

Grade/Age:

School:

Drop off/Pick Up Plan: *(Pick up available from LHE; Buses available from Cascadia & Eagle Staff)*

Primary Parent Contact Number:

Parent emails for weekly communications:

Does your child have any food allergies or medical issues we should know about?

If yes, please explain:

List approved adults for pick up:

|  |  |  |
| --- | --- | --- |
| **Name** | **Relationship** | **Phone Number** |
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Parent/Guardian Signature:

Date: