

Bedminster Township Recreation



(Entering Grades 1 to 7)

When we think of kid's in the kitchen, the first thing that come to mind is a big mess! Believe it or not, kids and cooking go hand in hand. To them it is an edible craft project.

Ms. Gail's **Kids Cooking** will teach kids how to prepare their own food, giving them a sense of self-esteem and getting them to try different things while learning the math and science that goes along with it! Throughout the eight (8) sessions, the children will learn about kitchen safety, the different types of kitchen tools and how to use them properly, and cleanliness (hand washing, covering mouth when sneezing, etc.). Participants will also learn about how important fruits and vegetables are to make them grow. Every recipe includes a lesson in food groups and proper nutrition.

Children will be divided into work groups by age. **Kids Cooking** will be held in the Bedminster School Family & Consumer Science Room #262 immediately following the school day. **Please note this is an afterschool program for Bedminster School students only!** The cost of the program is \$135 and includes supplies.

Date	Days	Time	Grades	Fee
October 4, 11, 18, 25 November 1, 8, 15, 22	TUESDAYS (Immediately Afterschool)	3:35 pm to 4:45 pm	Grades 1-7	\$135

Register on-line with credit card at www.bedminster.us or return registration form with check payable to "Bedminster Recreation" **by Monday, September 26th!**
After September 26th there is a \$20 late fee per person.



Bedminster Township Recreation Department
One Miller Lane
Bedminster, NJ 07921
Telephone: (908) 212-7014
www.bedminster.us

REGISTRATION FORM ATTACHED

Bedminster Township Recreation



(One Registration Form Per Child)

Name _____ Grade _____ Date of Birth _____ Age _____
 Complete Address _____
 Email Address _____ Telephone _____
 Emergency Contact _____ Telephone _____

1. Hold Harmless/Parent or Guardian Signature Required

As the parent or legal guardian of a participant in the Bedminster Township Recreation Program, I acknowledge this to be a voluntary activity. I acknowledge that there are certain risks inherent in my child's participation in this activity, and I agree to accept all of the consequences and assume the risks involved in my child's participation. I understand and acknowledge that Bedminster Township is not responsible for any loss, damages or injury to any person or property for any reason associated with my child's participation in this activity. In light of the above, I hereby agree to indemnify and hold harmless and release Bedminster Township from any and all liability for any and all injuries my child may sustain as a result of my child's participation in this activity.

Signature of Parent/Guardian _____ **Date** _____

2. Allergies/Medications/Special Needs/Accommodations

- **Allergies/Disabilities/Medical Conditions** - Does your child have asthma, allergies, or any other medical conditions we should know about in order to be able to assist your child? _____
- **Epinephrine Auto-Injectors** - _____ (√) Check here if your child requires the use of an epinephrine auto-injector device.
- **Medications** - Is your child on medication during the program and is he/she able to self-medicate? Please explain and list medications needed during program hours or in the event an emergency presents itself. _____
- **Special Needs/Accommodations** - Bedminster Recreation welcome individuals with disabilities to participate in all recreation programs and activities. In accordance with the Americans with Disabilities Act (ADA) please describe below any accommodations needed for you or your child's enjoyment of this program. A staff member will contact you for more information.

3. Bedminster Township Photo Release

_____ I GRANT _____ I DO NOT GRANT PERMISSION to the Township of Bedminster and/or the Media to photograph my child while participating in Township recreation programs or functions my child is participating in for publicity and/or promotional purposes.

Signature of Parent/Guardian _____ **Date** _____

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