



ENTRY FORM and WAIVER

DATE: _____

SCHOOL: _____

I ACCEPT AND FULLY ASSUME all health and safety risks, danger and hazards which may be associated with my participation in University Jr. Chefs 6, Intercollegiate Cooking Contest.

NAME: _____

AGE: _____

YEAR and COURSE: _____

BIRTHDATE: _____

CONTACT NUMBER/S: _____

FB/Email Add: _____

Documents submitted: *(All must be original)*

- School ID
- Certificate of Enrollment/ School Registration

Additional Requirements for 17 years old only:

- Parents/ Guardian's Letter of Consent Parents/ Guardian's Valid ID (Gov't Issued)

I AGREE not to hold the organizer/s responsible for any environmental and safety infraction incurred during the activities whether due to unforeseen circumstances or the failure to comply with organizer/s instruction, rules and contest mechanics and that we have fully read and understood the contest mechanics.

Signature over printed name

