**North Country Jr. Iron Chef**

**Adult Release Form**

**This form must be completed by each adult who wishes to participate in**

**North Country Jr. Iron Chef on March 28, 2026.**

**Name:** Click here to enter text. **Phone:** Click here to enter text.

**School/Organization Name:** Click here to enter text.

**School/Organization Role:** Click here to enter text.

**Team Name:** Click here to enter text.

**Team Role** (select one)**: ☐Team Coach ☐Assistant Coach**

**Mailing Address:** Click here to enter text.

**Email:** Click here to enter text.

**Emergency Contact Name & Phone Number:** Click here to enter text.

Cornell Cooperative Extension of St. Lawrence County (CCE SLC), St. Lawrence Lewis BOCES (BOCES), and all organizers of North Country Jr. Iron Chef will exercise reasonable judgment and care in the planning and operation of the event. I understand and agree that CCE SLC, BOCES, and any affiliated parties, will not be liable for injuries resulting from accidents or unanticipated occurrences beyond their control.

I understand that if I am the Team Coach as indicated above; I must be 25 years of age or older, I must be present throughout the entire competition, and I am the responsible party for the student team members throughout the competition.

I also understand that North Country Jr. Iron Chef is a public event which may be covered by the media. By signing this form, I consent and give permission to allow Cornell Cooperative Extension the right to use photos, videos, direct quotes, and/or audio clips that they have of me participating in Cornell Cooperative Extension programs or events. Further, by signing this consent and release form, I acknowledge that I understand and agree to the above request and conditions. I sign this form freely and without inducement.

**ACKNOWLEDGEMENT OF RISK**

I fully understand and acknowledge that there are inherent risks and dangers in my participation in the above activities and my participation in said activities and use of equipment or materials related to such activities may result in my injury , illness or death and damage to or loss of my personal property. I understand other participants, accidents, forces of nature or other causes may cause these risk and dangers and I hereby fully

acknowledge and accept these risks and dangers. I am in good health and I am at or above the minimum age of 18 required to participate in this activity and I am able to participate in any strenuous physical activity associated therewith. I herewith release, forever discharge and waive any right of recovery or subrogation against Cornell Cooperative Extension, its officers, directors, employees and volunteers from any and all liability whatsoever for any illness or injury, including death or damage to or loss of my personal property that I may sustain while I am participation in this program. This shall be binding on my heirs, successors, assigns, administrators and executors. Any claims or disputes arising out of my participation in the activity shall first be submitted to arbitrations and/or be venued in the Supreme Court of the State of New York of the sponsoring County Association, the choice of which shall be at sole discretion of CCE.

With my signature, I affirm that the statements made on this application are true. I further release all parties supplying said information from all liability and responsibility arising from their supplying said information. This form will be kept in CCE Association files for seven (7) years from date of submission.

**I have read the above form and my signature below demonstrates I have provided my consent to participate in North Country Jr. Iron Chef competition.**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature Date**

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