



CITY OF MOUNT VERNON, N.Y.  
MOUNT VERNON YOUTH BUREAU

SHAWYN PATTERSON-HOWARD  
Mayor

City Hall, One Roosevelt Square  
Mount Vernon, NY 10550  
(914) 665-2344 – Fax: (914) 665-1373  
cityofmountvernonyouthbureau@gmail.com  
HTTP://youthbureau.cmvny.com  
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DEBBIE BURRELL-BUTLER, MBA  
Executive Director

DENA T. WILLIAMS, MPA  
Deputy Director

## Summer Cooking Academy 2022

CHILD'S NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

City: MOUNT VERNON State: NEW YORK Zip: 1055

Age: \_\_\_\_\_ Date of Birth:  / / Ethnicity: Black, Hispanic, White, Asian, Other

Home Telephone # \_\_\_\_\_ Work Telephone # \_\_\_\_\_ Cell Telephone # \_\_\_\_\_

Parent Email: \_\_\_\_\_

### Emergency Contact

Does your child have any illnesses that will prevent them from taking part in daily activities or FOOD ALLERGIES? Explain.

\_\_\_\_\_  
\_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Contact Phone #: \_\_\_\_\_

Accordingly, I agree to voluntarily waive, release and discharge from any and all liability, The City of Mount Vernon, its elected and appointed officials, officers, agents and employees from any and all claims, damages, causes of action, demands in law and in equity, resulting from the negligence of The City of Mount Vernon, its elected and appointed officials, officers, agents and employees, or otherwise resulting from my child's participation in the

ogram. This agreement to be binding on my heirs, and personal representatives, next of kin, spouse and assigns.

Initial: \_\_\_\_\_

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND THAT IT IS AN AGREEMENT TO ASSUME ALL RISKS AND TO RELEASE THE CITY FROM ALL LIABILITY RESULTING FROM MY CHILD'S PARTICIPATION IN THE MOUNT VERNON YOUTH BUREAU SRAEP PROGRAM.

SIGNATURE OF PARENTS/GUARDIANS.

SIGATURE: \_\_\_\_\_

DATE: \_\_\_\_\_



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**Program Agreement**

This agreement is a binding contract between Cooking Academy participant \_\_\_\_\_ and The City of Mt. Vernon's Youth Bureau. By signing this contract, you are in full agreement to comply with the following rules and guidelines of the program.

All participants **MUST COMMIT TO 100%** participation in **ALL ACTIVITIES**. Any participant that has **TWO UNEXCUSED ABSENCES WILL BE TERMINATED FROM THE PROGRAM**.

Full participation of the program includes:

- Displaying maturity always
- Attending sessions on time
- Participating in all scheduled activities
- Completing any given assignments on time
- Never showing disrespect to any Youth Bureau staff, program instructor's or other participants
- Have fun while learning, sharing, and growing

The Cooking Academy maintains an open-door policy with families. Please feel free to express any comments, concerns, or compliments along the journey towards your summer experience.

\_\_\_\_\_  
Signature of participant

Please contact the Youth Bureau at (914) 665-2344 should you have any questions or concerns.

*"The Jewel of Westchester"*