

**COOKING  
REGISTRATION**

**Cooking Basics for Girls - 2021**

Registration Date: \_\_\_\_\_  
Confirmation Code: \_\_\_\_\_

**Dare to Dream Young Girls Network, Inc.  
Post Office Box 14652 \* Tallahassee, FL 32317 \*(850)847-3875**

**Registration & Payment Summary**

CLASS DATE: \_\_\_/\_\_\_/\_\_\_  
CLASS DATE: \_\_\_/\_\_\_/\_\_\_  
CLASS DATE: \_\_\_/\_\_\_/\_\_\_

**Parent Information**

Mother/ Father / Grand Parent:: _____	Address: _____
First Name: _____	City, State: _____
	Zip: _____
Last Name : _____	Telephone: _____/_____
	Email: _____

**Mini Chef/ Jr. Chef Information**

Child's Name: _____	Age: _____
School: _____	Favorite Food: _____
Food Allergies: _____	Favorite Dessert: _____

**Registration Details**

PAYMENT TYPE: \_\_\_ CASH/ \_\_\_ CHECK/ \_\_\_ CHARGE

<u>Description</u>	<u>QUANTITY</u>	<u>Price</u>	<u>Total</u>
----Cooking Class (MULTIPLE CLASSES @ \$35ea.)	_____	\$ _____	\$ _____
----Cooking Class (SINGLE CLASSE @ \$35)	_____	\$ _____	\$ _____
		<b>TOTAL PAID:</b>	<b>\$ _____</b>

**EMERGENCY CONTACT:**

NAME: \_\_\_\_\_ / PHONE: \_\_\_\_\_  
NAME: \_\_\_\_\_ / PHONE: \_\_\_\_\_