

Kids Cooking Academy Party Booking Form



CHILD'S DETAILS

Surname: _____ First names: _____

Age: _____ Male / Female (Please circle)

PARENT/GUARDIAN DETAILS

Surname: _____ First names: _____

Address: _____

Mobile no: _____

Email address: _____

BOOKING DETAILS

Date: _____ Time: _____

Total number of children: _____

Dish: _____

Invitation: Yes / No (Please circle)

**KCA may take photographs or video recordings of any class
for promotional or commercial use.**

I have read and agree to the Kids Cooking Academy Terms and Conditions

Signature: _____

Date: _____