**PLEASE FILL OUT ALL INFORMATION REQUESTED BELOW**

**THANK-YOU NOTE WITH FEEDBACK SECTIONS**

I, (print name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ , give my consent to participate in the physical fitness evaluation program conducted by Hardie Peak Performance.

**THANK-YOU NOTE WITH FEEDBACK SECTIONS:**
We want to express our sincere gratitude for your participation and support in this year's Summer Kids Create and conditioning. We had a fantastic time, and we hope you and your child enjoyed the experience as much as we did.

As we strive to continuously improve and provide the best experience for all participants, we kindly request your valuable feedback. Please take a moment to share your thoughts by completing the following sections:

**FOR PARENTS:**

What was new that you and/or your child tried during the event/camp?

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

What was your favorite part of the event/camp?

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

Have you noticed any positive changes in your child as a result of participating in activities like conditioning or cook/create at home?

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

Any other general reflections or feedback you would like to share?

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**FOR KIDS:**

What was your favorite activity during the event/camp?

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What new things did you learn or experience?

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Is there anything you'd like to do differently next time?

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Any other fun stories or feedback you want to tell us?

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

**PHOTO RELEASE**

I acknowledge that Hardie Peak Performance may take photographs or videos during my participation in the program. I grant Hardie Peak Performance permission and consent to use these photographs or videos of myself and/or my child for promotional purposes, including but not limited to social media and the organization's website. I understand that my identity or my child's identity may be disclosed in conjunction with the photographs or videos. I waive any claims or demands in connection with the use of these photographs or videos.

**SOCIAL MEDIA TAG SECTION**

I hereby grant permission to Hardie Peak Performance and its representatives to tag my social media account(s) in posts that are directly related to the program. By giving my consent, I understand that my name, image, and any other relevant information pertaining to the program may be shared with the online community. I trust that Hardie Peak Performance will exercise discretion and professionalism when using this information on social media platforms. Nonetheless, I am willing to participate in this capacity to contribute to the promotion and success of the Program.

By providing your feedback, you consent to Hardie Peak Performance using your comments for promotional purposes on our website and social media platforms. Your insights will help others understand the value of our program and encourage more families to join us in the future.

If you'd like to write a review of your experience on Facebook, we would greatly appreciate it! Your reviews can inspire other families to be part of our community.

NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

WITNESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

or GUARDIAN (for participants under the age of majority)

MEDICAL CONDITIONS/CONCERNS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\*Please notify us of any allergies your child has.**

Whether training, working in the kitchen or creating in the studio, listening attentively and prioritizing safety enriches our performance, creative process, and elevates the final masterpiece.