



CANADIAN SCHOOL OF NATURAL NUTRITION

Holistic Culinary Certificate Class Registration Form – PUBLIC (Spring 2022)

Branch: CSNN Vancouver Island

#208-3045 Douglas Street, Victoria, BC, V8T 4N2

APPLICANT TO COMPLETE

Name:			
Address:			
City:	Province:	Postal Code:	
Telephone (H):	(C):	(W):	
Email:			SIN # (if applicable*):
Emergency Contact Name & Phone #:			

*CSNN provides T2202 tax receipts for workshops that are at least 12 hours in length in a month and are provided over at least 3 consecutive weeks. Revenue Canada requires SIN number to be included on the tax receipts. For further information, contact CRA at 1-800-954-8281. CSNN will keep your SIN number private and safe. For workshops that do not qualify for T2202, an internal CSNN receipt will be given.

Check Desired Workshop(s): Dates and Times may be subject to change.	<input type="checkbox"/> Introduction to Whole Foods Feb , 21 2022 6pm PST(3.5 hours)	<input type="checkbox"/> Gluten Free Baking Apr 4, 2022 – 6pm PST (3 hours)
	<input type="checkbox"/> Kitchen Culture and Knife Skills Feb 28, 2022 - 6pm PST (3 hours)	<input type="checkbox"/> Inflammation and Detoxification Apr 11 , 2022 – 6pm PST (3 hours)
	<input type="checkbox"/> Preparation of Whole Foods Mar 7, 2022- 6pm PST (3 hours)	<input type="checkbox"/> Digestion/Allergies/IBS Apr 18, 2022 – 6pm PST (3 hours)
	<input type="checkbox"/> Fermentation and the Microbiome Mar. 14 2022 - 6pm PST (3 hours)	<input type="checkbox"/> Blood Sugar Balancing/Keto & Intermittent Fasting Apr 25 2022 – 6pm PST (3 hours)
	<input type="checkbox"/> Healthful Broths Mar 21, 2022 – 6pm PST (3 hours)	<input type="checkbox"/> Whole Foods Pantry and Healthy Snacks May 2 2022 – 6pm PST (3 hours)

PAYMENT AND ACCEPTANCE

PAYMENT PLANS	VARIABLE PAYMENTS:	10 CLASSES TO OBTAIN HOLISTIC CULINARY CERTIFICATE:
TUITION	\$45.00	\$450.00
PROCESSING, MATERIALS AND TECHNOLOGY FEE	9.52	\$50.00
GST	\$0.48	\$2.50
GRAND TOTAL:	Number of workshops x \$55.00=	\$502.50

Classes to be held at: Victoria, Virtually

Note: Co-requisite fees are **payable via credit/debit, cash, cheque or e-transfer (audrey@csnn.ca)**. Payment in full, due a minimum of 1 week prior to the scheduled start date.

PROGRAM INFORMATION

Program Title: Introductory Holistic Culinary Course

Workshops may be taken individually for self-interest, or as a series package to achieve completion of the Holistic Culinary Certificate.

Virtual Monday Evening February 21, 2022 to May 2, 2022

Hours of Instruction: 30 Hours

Language of Instruction: English

Program Delivery Method: Virtual only



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Required material and technology resources not provided by the institution: Students must have a computer with web camera, microphone, and high-speed internet. A noise-cancelling headset is optional. Google Chrome is the preferred browser.

PROGRAM OUTLINE

Admission Requirement: None

Career Occupation: Home cook, food preparation, holistic cook, food shopper, meal planning.

Learning Objectives: Participants, through hands-on experience of holistic food preparation will learn basic holistic cooking skills, techniques, and understand food therapeutics. The workshops are designed to integrate food therapeutics into the kitchen, provide recipes, to give students increased confidence and skill in the areas of meal planning, food shopping, and food preparation.

Method(s) of Evaluation: Attendance is required. Evaluation may include participation in workshop discussions and/or food preparation exercises.

Completion requirements: Workshops may be taken individually for self-interest with no evaluation requirement. To qualify for the Holistic Culinary Certificate, students must complete 10 different Culinary Workshops and achieve a minimum of 30 hours attendance.

Program Organization

	Number of Hours
Introduction to Whole Foods	3
Food Safety and Knife Skills	3
Preparation of Whole Foods	3
Fermentation and the Microbiome	3
Healthful Broths	3
Gluten-free Baking	3
Inflammation and Detoxification	3
Digestion/Allergies/IBS	3
Blood Sugar Balancing/Keto and Intermittent Fasting	3
Whole Foods Pantry and Healthy Snacks	3
Total Hours:	30

PLEASE READ THE FOLLOWING PRIOR TO SIGNING THIS CONTRACT (along with the WAIVER on page 2):

WITHDRAW & REFUND POLICY: If the applicant terminates registration at least 7 days prior to the workshop commencement date, a full refund will be issued. If registration is terminated by the applicant less than 7 days before or after the workshop start date, no refunds will be granted. If CSNN cancels a workshop for any reason, all paid fees will be refunded to the applicant.

RELEASE: "I hereby release *The Canadian School of Natural Nutrition Inc.* and all branches and affiliations from all claims of damages arising from any accident or injury which is caused by or arises from participation of the applicant named herein, during any program or any facility or any location where a program is held."

CONFIDENTIALITY AND DISCLOSURE: Absolutely no part of the contents in the copyrighted publications, course material or teachers notes, may be photocopied or adapted for teaching purposes or shared with anyone not taking the CSNN workshop. **BREACH OF THESE RESTRICTIONS WILL RESULT IN LEGAL ACTION.**

This program does not require approval by the Private Training Institutions Branch (PTIB) of the Ministry of Advanced Education (PTIB) of the Ministry of Advanced Education and Skills Training. As such, PTIB did not review this program. Students may not file a claim against the Student Tuition Protection Fund in relation to this program. This institution is certified by PTIB. For more information about PTIB, go to www.privatetraininginstitutions.gov.bc.ca.

Signature of Applicant: _____

Date: _____

Accepted by: _____

Date: _____



WAIVER, RELEASE, AND ASSUMPTION OF RISK

In consideration of the opportunity to participate in CSNN Vancouver Island cooking class(es), the receipt and sufficiency which is hereby acknowledged, I hereby agree as follows:

1. I confirm that my participation in the cooking classes is voluntary. I am in good health and suffer from no physical or mental condition that would make me especially susceptible to injury or illness while participating in the cooking classes, except as otherwise disclosed to CSNN Vancouver Island staff.
2. I understand that:
 - (a) it is my responsibility to inform CSNN Vancouver Island's staff of any allergies and special needs that I may have, prior to my participation in the cooking class(es);
 - (b) culinary activities such as cooking classes at CSNN Vancouver Island have certain risks, dangers and hazards ("Risks") and I assume full responsibility for all such Risks associated therewith and for any and all liability, injury, loss or damage which I may suffer or incur or cause to others as a result of my participation in the cooking classes.
3. I hereby waive, release, and forever discharge CSNN Vancouver Island and its affiliated entities, parent companies, subsidiaries, employees, shareholders, officers, directors, managers, and insurers (the "Releasees") from any and all claims, actions, damages, liabilities, losses, costs, and expenses (including, without limiting to, solicitor/client fees) for any injuries, losses or damages in any way arising out of my participation in the cooking classes.
4. I agree to defend and indemnify the Releasees from any and all claims of any kind whatsoever and in any way arising out of my participation in the cooking classes.
5. This Waiver shall endure and be binding on my heirs, beneficiaries, personal representatives, and assigns.
6. If any provision of this Waiver is for any reason declared to be invalid or enforceable, the validity and enforceability of the remaining provisions will not be affected.

This is a waiver and release of liability. I acknowledge that I have read and understand this document, that I am waiving certain legal rights which I or my heirs, next-of-kin, executors, administrators, assigns, and other representatives may have against CSNN Vancouver Island and that I am providing a release of liability for CSNN Vancouver Island and its agents and affiliated entities.

Signature of Attendee: _____ Date: _____
 Signature of Witness: _____
(Not a CSNN representative) _____ Date: _____

Form Submissions and Inquiries: CSNN Vancouver Island
 (250)668-8663 | victoria@csnn.ca

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