



## ☞ Agreement Terms ☞

TO EVIDENCE THEIR AGREEMENT these parties have subscribed their names to be effective the date and year indicated below.

Kitchen  
User/Name(s) \_\_\_\_\_  
\_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

City/State/Zip \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
\_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Brown County Culinary Kitchen Representative  
\_\_\_\_\_  
\_\_\_\_\_

Signature \_\_\_\_\_  
\_\_\_\_\_

Date \_\_\_\_\_  
\_\_\_\_\_

### Additional Storage Space Being Requested

Space Requested:	Rate:	Monthly Fee:



### Photo and Article Release

I hereby give the Brown County Culinary Kitchen consent to use personally identifiable information (business name, contact name, physical address, telephone number, e-mail, website, and fax) and to use photographs and other presentation materials.

I further understand that no special compensation will be provided to me for use of my food processing/kitchen-related information, materials, or photographs.

\_\_\_\_\_  
Your name

\_\_\_\_\_  
Brown County Culinary Kitchen

\_\_\_\_\_  
Date

Return to:

Advance Business Center  
2701 Larsen Rd.  
Green Bay, WI 54303  
Phone: 920.496.2110  
Fax: 920.496.6009



The following pieces of equipment require that the Kitchen User be trained and tested on the proper usage before being cleared to use the particular piece of equipment listed below.

**Dishwasher:**

Date/Initials

- Check chemicals before use

\_\_\_\_\_

- Use proper settings to start, operate and shut off

\_\_\_\_\_

- Load and unload using manufacture recommendations

\_\_\_\_\_

- Clean dishwasher after use

\_\_\_\_\_

**Range:**

Date/Initials

- Use proper settings

\_\_\_\_\_

- Re-light pilot if not working

\_\_\_\_\_

- Adjust heat levels

\_\_\_\_\_

- Shut off range properly

\_\_\_\_\_

- Clean range properly when finished

\_\_\_\_\_

**Ovens:**

Date/Initials

- Use proper settings

\_\_\_\_\_

- Re-light pilot if not working

\_\_\_\_\_



- Adjust oven rack appropriate to recipes  
\_\_\_\_\_

- Clean oven properly when finished  
\_\_\_\_\_

**Exhaust Hood**

Date/Initials

- Operate the Exhaust Hood  
\_\_\_\_\_

- Understand how to extinguish a fire  
\_\_\_\_\_

- Identify possible fire hazards

**Deep Fryer...no one under 18 may use this piece of equipment**

Operate fryer according to manual directions  
\_\_\_\_\_

Identifies possible burn hazards & first aid  
\_\_\_\_\_

Understands how to handle fire and/or oil spills  
\_\_\_\_\_

**Large Mixer:** (No one under 18 is allowed to use this equipment)

Date/Initials

- Select proper settings  
\_\_\_\_\_

- Able to assemble and disassemble mixer bowls & beaters  
\_\_\_\_\_

- Able to mix ingredients safely  
\_\_\_\_\_

- Clean according to the manufactures instructions  
\_\_\_\_\_



**Ice Machine:**

Date/Initials

- Use proper sanitary precautions when scooping ice

\_\_\_\_\_

- Check for proper filling and discharge of ice

\_\_\_\_\_

- Use gloves and proper tools for removing and storing ice

\_\_\_\_\_

**⇒ Caution should be used at all times when handling ice as it is a major source of food contamination. Gloves should be worn when scooping ice from the machine. The scoop is the only tool that should be used to scoop ice directly from the machine.**

**Injuries:**

Date/Initials

- All injuries, no matter how minor, need to be reported

\_\_\_\_\_

- Able to complete injury/illness report form

\_\_\_\_\_

- Understand how to submit injury report form

\_\_\_\_\_

- Able to locate the First Aid Kit & Emergency Phone Numbers

\_\_\_\_\_

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*The Kitchen User has completed the training for the proper use of the equipment and how to complete reports stated in this document.*

Kitchen User Signature

\_\_\_\_\_ Date \_\_\_\_\_

Brown County Culinary Kitchen

Representative \_\_\_\_\_

Date \_\_\_\_\_