



Suttle Lake Camp

INFORMED CONSENT/PARTICIPANT RELEASE TO PARTICIPATE IN ACTIVITIES ADMINISTERED AT SUTTLE LAKE CAMP

By registering for a Starshine Program, I, the participant or the parent/guardian of the participant(s) named here, _____

understand and assume all risk of personal injury or death resulting from any cause whatsoever as related to the events of the activities engaged in at Suttle Lake Camp, including archery and low ropes course. I also agree that Starshine, LLC is not responsible for any coinciding events on the property at Suttle Lake Camp and I am allowing entrance of the participant at my own risk.

I acknowledge that I have read, fully understand and accept the above provisions and I recognize that the Starshine, LLC is relying on such acceptance in permitting participant to engage in Starshine, LLC activities.

Participant (over the age of 18) or Parent/Guardian Signature

Date