



## INFORMED CONSENT/PARTICIPANT RELEASE

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

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understand the possibility of injuries resulting from activities sponsored by Starshine, LLC. I hereby acknowledge and accept all risks and hazards incidental to participation in such activities. I hereby release, absolve, indemnify and hold harmless Starshine, LLC and its employees and agents from any injury, whether to person or property, of the participant resulting from such activities. In case of personal injury to participant, I hereby waive any and all claims against Starshine, LLC, its employees and agents. I understand there is no insurance coverage provided by Starshine, LLC for participant and that such coverage constitutes a responsibility of the participant and/or the undersigned.

I hereby consent to emergency medical treatment of participant to assure prompt treatment and prevention of undue delay, and I understand that such treatment may be provided by either a licensed physician or trained emergency care technician.

I agree that Starshine, LLC may use, reproduce, disclose and distribute participant's first name and/or likeness for Starshine, LLC marketing purposes.

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.

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

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Date

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Name Printed



## Waiver of Liability Relating to COVID-19

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is reported to be extremely contagious. The state of medical knowledge is evolving, but the virus is believed to spread from person-to-person contact and/or by contact with contaminated surfaces and objects, and even possibly in the air. People reportedly can be infected and show no symptoms and therefore spread the disease. The exact methods of spread and contraction are unknown, and there is no known treatment, cure, or vaccine for COVID-19. Evidence has shown that COVID-19 can cause serious and potentially life threatening illness and even death.

Starshine, LLC cannot prevent you (or your child(ren)) from becoming exposed to, contracting, or spreading COVID-19 while utilizing Starshine LLC's services. It is not possible to prevent against the presence of the disease. Therefore, if you choose to utilize Starshine, LLC's services you may be exposing yourself to and/or increasing your risk of contracting or spreading COVID-19.

**ASSUMPTION OF RISK:** I have read and understood the above warning concerning COVID-19. I hereby choose to accept the risk of contracting COVID-19 for myself and/or my children in order to utilize Starshine LLC's services. These services are of such value to me (and/or to my children,) that I accept the risk of being exposed to, contracting, and/or spreading COVID-19 in order to utilize Starshine, LLC's services in person.

**WAIVER OF LAWSUIT/LIABILITY:** I hereby forever release and waive my right to bring suit against Starshine, LLC and its owners, officers, directors, managers, officials, trustees, agents, employees, or other representatives in connection with exposure, infection, and/or spread of COVID-19 related to utilizing Starshine, LLC's services and premises. I understand that this waiver means I give up my right to bring any claims including for personal injuries, death, disease or property losses, or any other loss, including but not limited to claims of negligence and give up any claim I may have to seek damages, whether known or unknown, foreseen or unforeseen.

**CHOICE OF LAW:** I understand and agree that the law of the State of Oregon will apply to this contract.

**I HAVE CAREFULLY READ AND FULLY UNDERSTAND ALL PROVISIONS OF THIS RELEASE, AND FREELY AND KNOWINGLY ASSUME THE RISK AND WAIVE MY RIGHTS CONCERNING LIABILITY AS DESCRIBED ABOVE:**

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

Date:

Name (printed)

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Name(s) of Participant(s)