

**High Adventure Activities Parental Consent Form**

Killarney Lutheran Camp  
1200 Chisholm Rd  
Onsted, MI 49265  
517-467-7603

Child Full Legal Name \_\_\_\_\_

Age \_\_\_\_\_ Date of Birth \_\_\_\_\_

The following activities may be offered while your child is at camp. **Please initial by each High Adventure Activity that you permit your child to participate.** Then sign and date below. Your signature means that you give your child/ward permission to participate, if s/he chooses to do so. If you do not wish to initial for one or more of these activities, your child/ward will NOT be allowed to participate those activities.

**Please initial below:**

- Swimming (pool&lake) \_\_\_\_\_
- Water Craft (boating) \_\_\_\_\_
- Adventure Course \_\_\_\_\_
- Rock wall/Ropes \_\_\_\_\_
- Overnight Camping \_\_\_\_\_
- Water slide \_\_\_\_\_
- Swimming \_\_\_\_\_
- Horse back riding \_\_\_\_\_
- Running Games \_\_\_\_\_
- Travel Groups (R145) \_\_\_\_\_

I, hereby, give permission for my child/ward named below to participate in High Adventure Activities at Camp Killarney, 1200 Chisholm Rd, Onsted, MI 49265 (Rule 133). Some activities will be field trips held at a location that is NOT Camp Killarney and will require transportation.

\_\_\_\_\_  
Signature Date

**TRANSPORTATION**

I give permission to have my child/ward transported in a staff vehicle or designated bus to any of the above listed activities.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date