

A SEPARATE FORM MUST BE COMPLETED FOR EACH PLAYER AND BUDDY.



SPRING 2012 REGISTRATION FORM
FORM MUST BE POSTMARKED BY MARCH 7, 2012
P.O. BOX 7003
VISALIA, CA 93290
559-635-1478

First Name: _____ Last Name: _____ Gender: M/ F
Parent/Guardian: _____ (if applicable)
Mailing Address: _____ City: _____ State: ____ Zip Code: _____
Home Phone: _____ Emergency Phone: _____
E-Mail Address: _____

REGISTRATION FEE: \$40.00
\$60.00 IF POSTMARKED AFTER MARCH 7, 2012

FOR PLAYERS ONLY

Birthdate: _____ Age: _____ Wheelchair: Y/N Walker: Y/N
Diagnosis: _____
Shirt Size: Youth: S(6-8) M(10-12) L(14-16) Adult: S M L XL 2XL 3XL 4XL (circle one)
Special Requests: _____

FOR VOLUNTEERS ONLY

Are you 18 years or older? Y/N If no, please list age: _____ **Drivers License#:** _____
How would you like to participate?: (please circle)
Buddy Coach Asst. Coach
Special Requests: _____

I have read the Release and Indemnification Agreement and the Media Release on the reverse side of this form, fully understand the terms of each, and understand that I, player, and/or minor-age volunteer have agreed by signing this form with these terms. I sign this form on behalf of myself, player and/or minor-age volunteer.

Signature of Responsible Party: _____



MIRACLE LEAGUE OF VISALIA, INC.

**RELEASE AND INDEMNIFICATION AGREEMENT
(UNDER 18 AND/OR OVER 18 AND LEGALLY DEPENDENT)**

We, by signing on the reverse side of this page, are the parents or guardians, or conservator of the above named participant. In consideration for the Miracle League of Visalia, Inc. ("Miracle League") providing the opportunity for our child to participate in Miracle League baseball, we hereby release Miracle League from any and all claims, damage, or injury that we may suffer as a result of our dependent's participation in Miracle League baseball. In addition, we hereby agree to indemnify, defend and hold Miracle League and its officers, directors, volunteers, agents, contractors, supporters, or any other person associated with Miracle League harmless from any and all claims for loss, damage (including attorneys fees and costs, including, but not limited to experts and consultants fees), liability, death, or injury to the person or property arising from or related to our dependent's participation in Miracle League baseball, including, but not limited to, claims by our dependent against Miracle League.

We assume all risks and hazards involved in, or incidental to, our dependent's participation in Miracle League games and activities and hereby consent to having our dependent receive first-aid and/or emergency care by a qualified Emergency Medical Technician or physician in the event that our dependent suffers any injury during Miracle League games or activities.

We agree to provide all pertinent medical information to the Miracle League and to assist Miracle League so that adequate precautions can be made and so that appropriate care can be provided to our child during Miracle League games and activities. We agree to have all of our dependent's necessary medication on hand during all Miracle League activities and to be solely responsible for administering any such medication to our dependent.

We agree that at least one parent or guardian, if the participant is a player, will be physically present at all times during Miracle League games and activities.

**RELEASE AND INDEMNIFICATION AGREEMENT
(ADULT VOLUNTEERS AND LEGALLY INDEPENDENT PLAYERS)**

In consideration for the Miracle League of Visalia, Inc., ("Miracle League") providing me the opportunity to participate in Miracle League baseball, I hereby release Miracle League from any claims that I may have now or in the future, or damage or injury that I may suffer as a result of my participation in the Miracle League baseball. In addition, I hereby agree to indemnify, defend and hold Miracle League and its officers, directors, volunteers, agents, contractors, supporters or any other person associated with Miracle League harmless from any and all claims for loss, damage (including attorneys fees and costs, including, but not limited to experts and consultants fees), liability, death or injury to the person or property arising from or related to my participation in Miracle League Baseball.

I assume all risks and hazards involved in, or incidental to, my participation in Miracle League games and activities and hereby consent to receive first-aid and/or emergency care by a qualified Emergency Medical Technician or physician in the event of any injury during Miracle League games or activities.

MEDIA RELEASE

I hereby grant the Miracle League of Visalia, its affiliates, franchises, advertising and promotional agencies, and their agents, the irrevocable, unrestricted right to use, publish, display and distribute materials bearing my name, voice, likeness or any other identifiable representation of myself or my family members including my Miracle League dependent. These materials may appear in any form, style, color or medium whatsoever (including photographs, videotapes, films, sound recording, software, drawing, prints, broadcast, internet, and electronic media.) I agree that all material containing an identifiable representation of my dependent shall be and remain the sole and exclusive property of the Miracle League of Visalia. I hereby release and forever discharge the Miracle League of Visalia from any and all liability and damages relating to the use of my dependents name, voice and any other identifiable representation of me. I have agreed to the above in consideration of the opportunity given to my dependent by the Miracle League of Visalia to appear in these materials.