



Miracle League of Payette, Inc.
SUMMER 2016 PLAYER REGISTRATION FORM
Saturday, June 4, 2016 thru August 27, 2016

 Players Name Home Phone _____

 Street Address City County State Zip Code

 Parent / Guardian Email Work or Contact Number

M/F _____ Birthday _____ Age _____ School _____

Diagnosis _____

Special Needs or Requirements _____

Wheelchair _____ Walker _____ Other _____

Players Shirt Size: **Youth:** S M L **Adult:** S M L XL XXL (please circle one)

Starting in June, we will have Saturday games that begin at 9:00 am. Depending on enrollment, we may add on a later game to the line-up.

SPECIAL REQUEST:

- * Interested in Volunteering _____
- * Interested in Coaching _____
- * Interested in being a Team Mom _____
- * Interested in Assistant Coaching _____
- * Interested in Sponsorship _____

I hereby authorize or give authorization for my child/charge named above to participate in the Miracle League of Payette and release the Miracle League of Payette, its officers, Directors and volunteers of any liability for injury that may occur while participating as a player or spectator during the season.

I hereby grant the Miracle League of Payette, its advertising and promotion agencies the irrevocable, unrestricted right to use, publish, display and distribute materials bearing my name, voice, likeness or any other identifiable representation of myself, my family members including my Miracle League player/child. These materials may appear in any form, style color or medium whatsoever (including, without limitation, photographs, video tapes, films, sound recordings, software, drawings, prints, broadcast, internet and electronic media). I agree that all material containing any identifiable representation of me (including without limitation all negatives, plates and masters of any photographs, files, prints or tapes) shall be and remain the sole and exclusive property of the Miracle League.

I hereby release and forever discharge the Miracle League from any and all liability an damages relating to the use of my name, voice, likeness or any other identifiable representation of me. **I hereby** waive any right I may have to inspect or approve the finished materials or any part or element there of that incorporates my name, voice, likeness or any other identifiable representation of me, my family including my Miracle League player/child.

I have agreed to the above in consideration of the opportunity given to me by the Miracle League of Payette to appear in these materials. I acknowledge that I have fully read and understand this document and that I have had any questions regarding its effect or the meaning of its terms answered to my satisfaction. I certify that I am at least 18 years of age, unless this document is also signed by my parent or legal guardian.

Player Name _____ Signature _____

Signature of Parent or Guardian _____ Minor's D/O/B _____ Date _____

Name of Parent or Guardian (please print) _____