



VOLUNTEER REGISTRATION FORM

Name _____

Address _____

Phone Number _____

Email Address _____

Date of Birth _____ Age _____ Male Female

Emergency Contact Name _____

Emergency Contact Phone Number _____

I am interested in volunteering as a

- Buddy
- Coach
- Merchandise Stand Worker
- Fundraiser

The best way to reach me is by

- Email
- Phone

Youth T-Shirt

- S
- M
- L
- XL
- XXL

Adult T-Shirt

- S
- M
- L
- XL
- XXL

I, _____ agree that as a volunteer, it is my job to support the mission and purpose of this organization. The work I do will be worthwhile & challenging. I will respond to any situation and be flexible when it comes to working with the Miracle League players.

Volunteer Signature: _____ Date: _____

MIRACLE LEAGUE OF JOPLIN

Volunteer Release Form

Volunteer's Name: _____

In consideration for the Miracle League of Joplin providing the opportunity for me to volunteer for the Miracle League of Joplin, the undersigned does hereby release and agree to indemnify and hold harmless the Miracle League of Joplin, and each of the officers, directors, members, managers, employees, donors, volunteers, agents, successors, assigns and representatives, from any and all claims for personal injury, death, property damage, or any type of claim or damage (including but not limited to attorney's fees or litigations expenses) resulting from my activities in connection with participation in Miracle League activities or the participation of any family member or guest of the undersigned.

I assume all risks and hazards incidental to such participation in Miracle League games and activities.

Volunteer Signature

Date Signed

I hereby grant the Miracle League of Joplin, its affiliates, franchises, advertising and promotional agencies and their agents, the irrevocable, unrestricted right to use, publish, display and distribute materials including me. 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 and 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 myself.

I have agreed to the above in consideration of the opportunity given to me by the Miracle League of Joplin 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.

Parent/Guardian Signature

Miracle League of Joplin
PO Box 701
Joplin, MO 64802