



# ADULT PLAYER REGISTRATION

Fee is \$10.

Please make check payable to  
Miracle League of Joplin.

\_\_\_\_\_  
Player's Name

\_\_\_\_\_  
Players Address

\_\_\_\_\_  
Player's Primary Phone Number

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Player's Secondary Phone Number

\_\_\_\_\_  
Emergency Contact

\_\_\_\_\_  
Player's Age and Birth Date

\_\_\_\_\_  
Emergency Phone Number

Player's Gender  Male  Female

Email Address (please print clearly): \_\_\_\_\_

Disability/Types of Assistance Needed: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If you have a staff member that will be this player's Buddy,  
please complete the information below.

\_\_\_\_\_  
My Buddy's Name

\_\_\_\_\_  
Buddy's Phone Number

Uniform Shirt Size (Youth or Adult size pertain to player only)

Adult Size  Small  Medium  Large  X-Large  XX-Large

\_\_\_\_\_  
Player or Parent/Guardian Signature

# MIRACLE LEAGUE OF JOPLIN

## Player Release Form

Player's Name: \_\_\_\_\_

In consideration for the Miracle League of Joplin providing the opportunity for the player to participate in Miracle League baseball, 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 the player's activities in connection with participation in Miracle League baseball 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. I/We agree to be present at all games and activities so that I/We can manage our player's specific needs. I agree to be solely responsible for the player.**

\_\_\_\_\_  
Player or Parent/Guardian 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 my Miracle League player. 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 or the player (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 or the player. 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, my family including my Miracle League player.

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.

\_\_\_\_\_  
Player or Parent/Guardian Signature

**Complete this and the Registration Form. Mail both plus payment check to:**

**Miracle League of Joplin**

PO Box 701

Joplin, MO 64802

JoplinMiracleLeague.org

miracleleaguejoplin@gmail.com