



Miracle League of Corpus Christi 18+ Volunteer Form

**PLEASE PRINT CLEARLY
ALL INFO AS APPEARS ON I.D.**

Volunteer Name: First _____ Middle _____ Last _____
Address: _____
City: _____ **State:** _____ **Zip:** _____
Social Security Number (For Background Check): _____ - _____
Phone Number: (____) _____ - _____ **DOB:** _____ / _____ / _____ **Sex:** _____
Email: _____

By providing the social security number above, I authorize the Miracle League of Corpus Christi to use all information provided by me for the purpose of volunteering. I, the undersigned applicant, understand the information on this form will be used solely for the purpose of conducting background checks to determine my eligibility to volunteer with the Miracle League and will remain confidential.

Permission Agreement and Release, Waiver and Indemnity Agreement

I authorize the Miracle League of Corpus Christi ("Miracle League") to allow me above named person (listed under "Volunteer Name" above and referred to herein as "Volunteer") to participate in the activities of the Miracle League. In such regard, in addition to signing and providing this permission agreement, I hereby indemnify the Miracle League and each of their agents and employees from all liabilities, damages and any claims made by the above-named Volunteer or on his or her behalf, including medical expenses incurred, should injury, loss of property, damages or death occur as a result of his or her participation in the Miracle League program and activities. We fully understand the nature of child care, sports and recreation services, and the risk of serious injury, loss of property, damages or death associated with these services.

FURTHER IN SUCH REGARD THE UNDERSIGNED:

1. HEREBY, RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE the Miracle League, each of their directors, officers, employees and agents (hereinafter referred to as the "Indemnitees") from all liability to the Volunteer and the undersigned and their personal representatives, assigns, heirs and next of kin, for any loss or damage and any claims or demands therefrom on account of injury to the above named Volunteer or his or her property or resulting in the death of the above named Volunteer, whether caused by the negligence of the indemnitees, or otherwise, while such Volunteer is in, upon or about the premises or any facilities or equipment of the Miracle League, or participating in any program affiliated with the Miracle League; and,

2. INDEMNIFY, SAVE AND HOLD HARMLESS the Miracle League from any loss, liability, damage or cost that either may incur due to the presence of the undersigned in, upon or about the Miracle League premises or in any way using any facilities or equipment of the Miracle League or participating in any program affiliated with the Miracle League, whether caused by the negligence of the Indemnitees or otherwise; and,

3. THE UNDERSIGNED HEREBY PERMITS THE MIRACLE LEAGUE, KRIS, KIII, KZTV, KORO, the Corpus Christi Caller Times, the Corpus Christi Daily and other media outlets to make and use photographic likeness of the Volunteer, in a still or video commercial, to be exhibited by television broadcasting and/or the internet at the said media outlets. The material will be used for news and/or Miracle League purposes. It will also be utilized in Miracle League print materials and any forms of media release and/or video produced to help the Miracle League.

THE UNDERSIGNED further expressly agree(s) that the forgoing RELEASE, WAIVER AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the laws of the State of Texas and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. THE UNDERSIGNED HAS (HAVE) READ AND VOLUNTARILY SIGN(S) THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT and further agree(s) that no oral representations, statements or inducement, apart from the foregoing written agreement, have been made.

Volunteer Signature

Date

**PLEASE SUBMIT TO: themiracleleaguecc@gmail.com or drop off at office
MUST RECEIVE APPROVAL FROM DIRECTOR BEFORE VOLUNTEERING**