

- Adult  
 Child



The Miracle League of the Desert  
 c/o Basin Wide Foundation  
 56711 - 29 Palms Hwihway  
 Yucca Valley, CA 92284

<i>For League Use</i>	<i>Team:</i>	
	<i>Coach:</i>	
	<i>Uniform #:</i>	
<i>Shirt Size</i>	<b>Youth</b> S M L XL	<b>Adult</b> S M L XL XXL _____

- Competitive Play     Spring \$40     Fall \$40  
 Recreational Play     Both \$75

Make checks or money orders

payable to **The Basin Wide Foundation**

**Miracle League of the Desert**  
**REGISTRATION AND MEDICAL RELEASE FORM**

**PLAYER'S INFORMATION**

Male     Female    Date: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Age: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_ City: \_\_\_\_\_

(No P.O. Box)

Telephone: \_\_\_\_\_ Special Needs & Requirements: \_\_\_\_\_

Parent needed to help:

- Volunteering     Coaching     Sponsorship  
 Buddying     Umpire     Announcer

**PARENT / GUARDIAN INFORMATION**

E-mail: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Address: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Emergency Phone: \_\_\_\_\_

I hereby grant the Miracle League of the Desert, 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, 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 and damages relating to the use of my name, voice, likeness or any other identifiable representation.

I hereby waive any right I may have to inspect or approve the finished materials or any part or element thereof that incorporates my name, voice, likeness or any other identifiable representation of myself, my family including my Miracle League player/child.

I have agreed to the above consideration of the opportunity given to me by The Miracle League of the Desert 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.

I give authorization for \_\_\_\_\_ to participate in the Miracle League of the Desert, and do hereby release Miracle League of the Desert of any liability for injury that may occur while participating as a player or spectator during the season. Parent and/or Guardian must be present at all Miracle League games and/or events.

Name \_\_\_\_\_ Signature \_\_\_\_\_

Signature of Parent or Guardian \_\_\_\_\_

Name of Parent or Guardian (please print) \_\_\_\_\_

***For Official Use***

Amount Due: \$ \_\_\_\_\_ Amount Paid: \$ \_\_\_\_\_ Balance Due: \$ \_\_\_\_\_

League Official: \_\_\_\_\_ Cash / Check # \_\_\_\_\_

See Reverse