

The Miracle League of Edmond, Inc.
Spring 2010 REGISTRATION

Current Team_____

Please make checks or money orders payable to
Miracle League and mail check and form to:
Margo Price
711 Aberdeen Rd.
Edmond, OK 73025
For additional information please call: 850-7603

DEADLINE: 2-28-10
FEE: \$35.00

*** Interested in Volunteering?_____**

Players Name

Good Number for cancellation of games

Street Address

City

County

State

Zip Code

Parent / Guardian

e-mail

Work or Cell Number

M/F

Birthday

Age

School

Special Needs or Requirements

If the athlete has jersey and cap from last season there is no need to order.

Players Shirt Size: Youth: S M L XL Adult: S M L XL XXL Cap: Y or N (new players will get one)

I give authorization for my child _____ to participate in The Miracle League of Edmond, and do hereby release any liability for injury that may occur while participating as a player or spectator during the season.

I hereby grant The Miracle League of Edmond, 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 Association. **I hereby** release and forever discharge the Miracle League Association 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, 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 Edmond 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.

Name

Signature

Signature of Parent or Guardian