

SPRING 2010
MIRACLE LEAGUE OF ORANGE COUNTY
REGISTRATION RELEASE FORM
FOR BUDDY OVER 18 YEARS

Buddy Name _____
Buddy Address _____
Buddy Home Telephone Number _____

In consideration for The Miracle League of Orange County providing the opportunity for me to participate in Miracle League baseball, the undersigned does hereby release and agree to indemnify and hold harmless The Miracle League of Orange County, its officers and directors 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 litigation expenses) resulting from my participation in Miracle League baseball or the participation of any family member or guest. I assume all risks and hazards incidental to such participation in The Miracle League of Orange County games and activities and consent to receive first-aid and/or emergency care by a qualified Emergency Medical Technician or physician or other person qualified to render medical assistance in the event I suffer an injury during sanctioned games and activities.

Date Signed _____

Signature _____

I understand that there will be media and promotional coverage of The Miracle League of Orange County Games and activities and I give my consent to publish my name and picture for such purposes.

Signature _____