

**SPRING 2010
MIRACLE LEAGUE OF ORANGE COUNTY
REGISTRATION RELEASE FORM**

Player's Name: _____

In consideration for The Miracle League of Orange County providing the opportunity for my child 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 child'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 and consent for my child 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 my child suffers an injury during sanctioned games and activities.

I agree to provide my child's specific medical information to The Miracle League of Orange County so that appropriate precautions and care can be provided to my child during sanctioned games and activities. I/We agree to be present at all games and activities so that I/We can manage our child's specific needs. I agree to have any and all medication (prescription and nonprescription) for my child and shall be solely responsible for dispensing any such medication to my child.

Date Signed

Parent /Guardian Signature

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

Parent/Guardian
Signatures _____