



League of Miracles

2022 Spring Baseball League

WHO: Special need athletes - youth and adults.

WHAT: The League of Miracles is a non-profit organization in the Camby/Mooresville area that provides recreational adaptive sports. Join the SPRING Baseball Season!

WHERE: League of Miracles located at 7101 E. Landersdale Road; Camby, IN 46113

WHEN: Every Tuesday and Saturday during the month of June.

Tuesday: Youth league starts at 5:30 p.m. and the adult league starts at 6:30 p.m. (Times are subject to change.)

Saturday: Youth league starts at 10:00 a.m. and the adult league starts at 11:00 (Times are subject to change.)

Dates: June 4th, June 7th, June 11th, June 14th, June 18th, June 21st, June 25th and the last game is June 28th.

HOW TO REGISTER:

1. Complete the registration form: Hard copy on the following pages and email to leagueofmiraclesinc@gmail.com **OR electronic submission on our Facebook page:**

<https://www.facebook.com/LeagueOfMiracles> (look for registration post)

Register by May 15th to guarantee a jersey.

2. Submit payment of \$30 registration fee. Payable by check or cash on the first game.

Or you may pay via PayPal at the following URL:

<https://www.paypal.com/paypalme/leagueofmiraclesinc>

PLEASE VISIT OUR WEBSITE (leagueofmiracles.org) or FACEBOOK (League of Miracles, Inc).

League of Miracles 2022 Spring Baseball

Athlete's First and Last Name: _____

Parent/Guardian First and Last Name: _____

Email: _____ Phone Number _____

Home Address: _____

Athlete Age: _____ Athlete Grade: _____ Athlete School: _____

Athlete Shirt Size (Circle One) Any Late Registrations will NOT be guaranteed a jersey or hat. We will not be ordering more after the final registration date.

_____ Youth Small

_____ Youth Medium

_____ Youth Large

_____ Youth X Large

_____ Adult Small

_____ Adult Medium

_____ Adult Large

_____ Adult X Large

_____ Adult XX Large

What form of payment will you submit for the \$40 registration fee? Please circle your option.

_____ Credit/Debit via PayPal: <https://www.paypal.com/paypalme/leagueofmiraclesinc>

_____ Check or Cash on First Game

_____ I cannot afford the \$30 registration fee. Our Executive Director will contact you, if needed.

Is there any information we need to know about your child? Please include any adaptations or required special equipment needed.

LEAGUE OF MIRACLES, INC. RELEASE AND WAIVER OF LIABILITY FOR PARTICIPATING AT LEAGUE OF MIRACLES

This Release and Waiver of Liability (the "Release") executed on this the [REDACTED] day of [REDACTED], 20[REDACTED], by [REDACTED] ("Athletic Participant's Name") hereby releases League of Miracles, Inc., a corporation existing under the laws of the State of Indiana, and each of its members, directors, officers, employees, and agents. The Athletic Participant desires to actively participate in and for the League of Miracles, Inc. and engage in the activities related to being an Athletic Participant for League of Miracles, Inc., 7101 E. Landersdale Road; Camby, Indiana (the "Activities"). The Athletic Participant understands that the scope of Athletic Participant's relationship with the League of Miracles, Inc. is limited to the Athletic Participant's position and the Activities and that no compensation is expected in return for the participation in the Athletic Participant or services provided by the Athletic Participant. In addition, Athletic Participant has read and understands this "Release and Waiver of Liability" and hereby freely, voluntarily, and without duress executes this Release under the following terms:

1. **Release and Waiver.** Athletic Participant and all attending family does hereby release and forever discharge and hold harmless League of Miracles, Inc. and its successors and assigns and each of its members, directors, officers, employees, and agents from any and all liability, claims, and demands of whatever kind or nature, either in law or in equity, that arise or may hereafter arise from Athletic Participant's participation in the Activities with League of Miracles, Inc. ATHLETIC PARTICIPANT UNDERSTANDS THE TERMS OF THIS RELEASE AND WAIVER OF LIABILITY AND HEREBY AGREES TO FOREVER DISCHARGE AND HOLD HARMLESS LEAGUE OF MIRACLES, INC., FROM ANY AND ALL LIABILITY, DEMAND OR CLAIM THAT THE VOLUNTEER MAY HAVE AGAINST LEAGUE OF MIRACLES, INC., OF WHATEVER KIND OR NATURE, EITHER IN LAW OR IN EQUITY INCLUDING BUT NOT LIMITED TO ANY BODILY INJURY, PERSONAL INJURY, ILLNESS, DEATH, OR PROPERTY DAMAGE THAT MAY RESULT FROM ATHLETIC PARTICIPANT'S PARTICIPATION IN THE ACTIVITIES WITH LEAGUE OF MIRACLES, INC., WHETHER CAUSED BY THE NEGLIGENT OR GROSSLY NEGLIGENT ACTS OR OMISSIONS OF LEAGUE OF MIRACLES, INC., OR ITS MEMBERS, DIRECTORS, OFFICERS, DIRECTORS, EMPLOYEES, OR AGENTS OR OTHERWISE. VOLUNTEER, ATHLETES AND FAMILY MEMBERS ALSO UNDERSTANDS THAT LEAGUE OF MIRACLES, INC. DOES NOT ASSUME ANY RESPONSIBILITY FOR OR OBLIGATION TO PROVIDE FINANCIAL ASSISTANCE OR OTHER ASSISTANCE, INCLUDING, BUT NOT LIMITED TO MEDICAL, HEALTH, OR DISABILITY INSURANCE IN THE EVENT OF INJURY OR ILLNESS.

2. **Medical Treatment.** Athletic Participant and all attending family do hereby release and forever discharge League of Miracles, Inc., and its successors and assigns and each of its members, directors, officers, employees, and agents from any claim whatsoever which arises or may hereafter arise on account of any first aid, treatment, or service rendered in connection with the Athletic Participant's participation in the Activities with League of Miracles, Inc.

3. **Assumption of the Risk.** The Athletic Participant and all attending family understand that the Activities may involve work that may be hazardous to the Athletic Participant, including, but not limited to, the game of kickball, which could cause injury, accidents or collisions and may involve inherently dangerous activities. Athletic Participant hereby expressly and specifically assumes the risk of injury or harm from volunteering to participate in the Activities and in the travel to and from the Activities, and hereby releases League of Miracles, Inc., and its successors and assigns and each of its members, directors, officers, employees, and agents from all liability for injury, illness, death, or property damage resulting from volunteering and participation in the Activities and in the travel to and from the Activities and/or League of Miracles, Inc and/or its Sports Complex.

4. **Insurance.** The Athletic Participant and all attending family understands that the League of Miracles, Inc. does not assume any responsibility for or obligation to, carry, provide or maintain health, medical, or disability insurance coverage of any nature for any Athletic Participant except as otherwise agreed to by League of Miracles, Inc. in writing. The Athletic Participant is expected and encouraged to obtain his or her own medical or health insurance coverage and does hereby expressly waive any claim for compensation or liability on the part of the League of Miracles, Inc. and its successors and assigns and each of its members, directors, officers, employees, and agents beyond what may be offered in writing or freely by the League of Miracles, Inc. in the event of such injury or medical expense incurred by the Athletic Participant during the Activities or travel to and from the Activities and/or the League of Miracles, Inc and/or its Sports Complex.

5. **Photographic Release.** The Athletic Participant and all attending family does hereby grant and convey unto League of Miracles, Inc. all right, title, and interest in any and all photographic images and video or audio recordings made by League of Miracles, Inc. during the Athletic Participant's participation in the Activities with League of Miracles, Inc., including, but not limited to, any royalties, proceeds, or benefits derived from such photographs or recordings.

6. **Other.** Athletic Participant and all attending family expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of Indiana, and that this Release shall be governed by and interpreted in accordance with the laws of Indiana. Volunteer and Athletes also agree that in the event that any clause or provision of this Release

shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release which shall continue to be enforceable. The Undersigned also declares that neither the Undersigned nor a child the Undersigned is responsible for, if applicable, are under the influence of any chemical substance that may impair my mental faculties and sound judgment at the time of the signing of this release or at the time of the Undersigned child's use of the Premises.
IN WITNESS WHEREOF, Volunteer understands and has executed this Release and Waiver of Liability willingly and Voluntarily.

Signature

Date

LEAGUE OF MIRACLES, INC. EMERGENCY CONTACT INFORMATION

Emergency Contact Information for: _____ Date: _____

Any Allergies, medications, or other information needed in an emergency:

Emergency Contact

Name: _____

Address: _____

Phone day: _____ Evening: _____ Cell: _____

Name: _____

Address: _____

Phone day: _____ Evening: _____ Cell: _____

Name: _____

Address: _____

Phone day: _____ Evening: _____ Cell: _____

You may scan and email this to leagueofmiraclesinc@gmail.com or hand this in at registration. We will also have this paperwork on the first day of games.