Volunteer Registration Form

2022

Name_____

Address_____

Phone #_____

Email_____

I am interested in being: _____Coach _____Buddy

_____Volunteer

In consideration for The Miracle League of Parker 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 Parker County, it's staff, 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 activities in connection with 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 games and activities and consent to receive first aid and/or emergency medical care in the event of an injury.

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

_____ _____

Signature Date Signed

Please sign and return to:

James Gray

Executive Director

(817)614-6261

james.grayy31@gmail.com