



Miracle League of the Lakeshore  
**Player Registration Form**  
 2022 Season

The Miracle League of the Lakeshore, a program of Goodwill NCW, is an organized baseball league for children ages 4-19 with intellectual and/or physical disabilities. Games are played at the accessible Goodwill Miracle Field of Dreams facilities at Miracles Park, Manitowoc. Players will be notified of their teams in May. The season will start the week of June 6<sup>th</sup>.

This year we are requiring all families to register a back-up volunteer (buddy) for their player. Since we don't know how many volunteers will return this season, this will ensure a successful season.

**The registration deadline for a player and back-up volunteer is MARCH 29, 2022.**

*Please print legibility and fill out front & back of form.*

Player Name \_\_\_\_\_ Nickname \_\_\_\_\_

(circle one) Male / Female    DOB \_\_\_\_\_    Age as of June 1 \_\_\_\_\_    School \_\_\_\_\_

Parent(s)/Guardian(s) Name \_\_\_\_\_

Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Phone # \_\_\_\_\_ Cell # \_\_\_\_\_

Email Address \_\_\_\_\_ Emergency Contact and Phone # \_\_\_\_\_

This is my first year playing Miracle League baseball:    YES    NO

Team/coach name from 2019 season \_\_\_\_\_

This will be my    1<sup>st</sup>     2<sup>nd</sup>     3<sup>rd</sup>     4<sup>th</sup>     5<sup>th</sup>     6<sup>th</sup>     7<sup>th</sup>     year as a player

**Please provide specifics about your child - this will assist in the volunteer match (if desired). Include any information that will support the success of your child in addition to disability, special needs, requirements, schedule requests or team requests:**

\_\_\_\_\_

\_\_\_\_\_

**ABOUT MY CHILD – Primary Diagnosis:** \_\_\_\_\_

*\*In the best interest of the player, a parent/guardian must be onsite during the player's baseball game; this is not a drop off league.*

Communication Style:

- Verbal
- Sign Language
- Visuals
- Gestures

Adaptive Needs:

- Wheelchair
- Walker
- Orthotics
- Other \_\_\_\_\_

**Player Shirt Size (circle one) YOUTH: S M L XL OR ADULT: S M L XL 2XL 3XL**

***If the wrong shirt size is ordered, a \$20 fee will be charged to the family for a replacement.***

How did you hear about the Miracle League of the Lakeshore? \_\_\_\_\_

**Volunteer (buddy) needs for my child**

The name of my child's back-up volunteer for the season is \_\_\_\_\_

*Remember to return the volunteer registration form by March 29.*

I want my child to remain with the back-up volunteer listed above for the whole season.

If available, I would like my child to be matched with a community volunteer. Which type of volunteer would be best for your child's needs?

(circle one) Adult      Young Adult      Teen

I give authorization for my above-named to participate in the Miracle League of the Lakeshore. I know that participation in baseball may result in serious injuries, and protective equipment does not prevent all injuries to players, and I do hereby waive, release, absolve, indemnify, and agree to hold harmless the Miracle League of the Lakeshore, Goodwill NCW, and the City of Manitowoc, their organizers, sponsors, agents, insurers, supervisors, participants, and volunteers, from any claim arising out of any injury to my/our child whether the result of negligence or for any other cause.

I hereby grant the Miracle League of the Lakeshore, 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 social 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 of the Lakeshore

I hereby release and forever discharge the Miracle League of the Lakeshore 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 thereof that incorporate my name, voice, likeness or any other identifiable representation of myself, my family including, my Miracle League player/child.

By signing below, I acknowledge that I have fully read and understand this document and I have had questions regarding its affect, 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.

Player Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent/Guardian (if under 18) \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name of Parent/Guardian: \_\_\_\_\_

**Registration Fee:**

**\$45/player.** Please make all checks payable to: **GOODWILL/MLL**

(\$5/player discount for families with 2+ players in the league)

Player scholarships are available via application request, please email [miracleleaguelakeshore@yahoo.com](mailto:miracleleaguelakeshore@yahoo.com)

Please consider making a donation to support the Miracle League of the Lakeshore Player Scholarship Fund

\_\_\_\$5 \_\_\_\$10 \_\_\_\$15 \_\_\_\$20 \_\_\_other\_\_\_

**Mail completed form & registration fee to:**

Miracle League of the Lakeshore

Attn: Laura Ziemer

PO BOX 232

Manitowoc, WI 54221

[miracleleaguelakeshore@yahoo.com](mailto:miracleleaguelakeshore@yahoo.com)

[www.miracleleaguelakeshore.com](http://www.miracleleaguelakeshore.com)

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