

PLAYER REGISTRATION FORM

For additional information please call: (859) 254-9622

Or visit our website: www.ymcacky.org

League Fee: \$45 Checks payable to YMCA

Player Name		Home Phone	E-mail	
Street Address	City	County	State	Zip Code
Parent/Guardian	rent/Guardian Alternate Phone		Emergency Contact & Phone Number	
M/F Birth Date	Age	School		
Diagnosis & Current Prescrip	ption Medications:			
(complete on back if necessary)			······································	
Primary Care Physician		Pho	ne Number	
Special Needs or Requirement	nts			
Wheelchair Wal	kerOthe	er		
Players Shirt Size: (Youth	or Adult) & (S M L	XL XXL) Team Pref	erence	
dersigned, for himself or herse d discharge the Toyota Bluegra mage to personal property, and	lf and any personal r ass Miracle League, i /or any claims or der	epresentatives, assigns, ho its directors, officers, emp mands therefore on accou	ployees, and agents from all nt of injury or death of the	y agrees to release, waive Il liability for any loss or undersigned. The
dersigned, for himself or herse d discharge the Toyota Bluegra	If and any personal rass Miracle League, it so any claims or dear does not have any rability is intended to	epresentatives, assigns, he its directors, officers, emp mands therefore on accound medical condition that wo to be as broad and inclusi-	eirs, and next of kin, hereb bloyees, and agents from all nt of injury or death of the uld keep him or her from p we as is permitted by the la	y agrees to release, waive Il liability for any loss or undersigned. The participation and that the tw of the Commonwealth
dersigned, for himself or herse d discharge the Toyota Bluegra mage to personal property, and dersigned agrees that the minor going Release and Waiver of I Kentucky. The undersigned al	If and any personal rass Miracle League, it for any claims or derivative does not have any radiability is intended to so acknowledges that ass Miracle League, it deright to use, public of myself, my family radium whatsoever ints, broadcast, intervithout limitation, all is the from any and all liated in the reby waive any it is so where the results of the reby waive any it is so where the results of the reby waive any it is so where the results of the reby waive any it is so where the results of the reby waive any it is so where the results of the reby waive any it is so where the results of the reby waive any it is so where the results of the reby waive any it is so where the results of the reby waive any it is so where the results of the reby waive any it is so where the results of the reby waive any it is so where the results of the reby waive any it is so where the results of the reby waive any it is so where the results of the reby waive any it is so where the results of the reby waive any it is so where the results of the reby waive any it is so where the results of the reby waive any it is so where the results of the reby waive any it is so where the reby waive and the reby waive any it is so where the reby waive and the reby waive any it is so where the reby waive and the reby waive waive and the reby waive and the reby waive waive and the reby waive a	epresentatives, assigns, he its directors, officers, empands therefore on accounted accounted and inclusive the series of the se	eirs, and next of kin, hereboloyees, and agents from all nt of injury or death of the uld keep him or her from power as is permitted by the lad voluntarily signed this Redvertising and promotional materials bearing my name diracle League player/chile tation, photographs, video as ters of any photographs, for League. I hereby release ang to the use of my name, et or approve the finished reduction of the state of the st	y agrees to release, waive Il liability for any loss or undersigned. The participation and that the law of the Commonwealth elease and Waiver of I agencies, and their le, voice, likeness or any d. These materials may tapes, films, sound containing any identifiable liles, prints or tapes) shall and forever discharge the voice, likeness or any other materials or any part or
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Please Mail Completed Form To: C/O Mike Massoglia or Abby Beausir Toyota Bluegrass Miracle League 239 E High Street, Lexington, KY 40504