



PLAYER RELEASE FORM

Deadline: April 15, 2011

Player Name: _____ Age: _____

Parent Name: _____

Address: _____

Email: _____ Phone: _____

In consideration for the Miracle League of Louisiana, Inc., d.b.a. the Miracle League at Cypress Mounds, and JBR Development, Inc., d.b.a. Cypress Mounds, LLC and related parties (the "Entities") 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 Entities and 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 Entities so that appropriate precautions and care can be provided to my child during sanctioned games and activities. I agree to be present at all games and activities so that I can manage my 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.

Parent/Guardian Signature: _____ Date: _____

I understand that there will be media and promotional coverage of Miracle League Games and activities and I give our consent to publish my child's name and picture for such purposes. I hereby grant the Miracle League Association, its affiliates, franchises, advertising and promotional agencies, their agents, and above "Entities," 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 electronic media). I agree that all material containing 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 Association and Entities. I hereby release and forever discharge The Miracle League Association and Entities from any and all liability and damages relating to my name, voice, likeness or any 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 incorporates my name, voice, likeness or any other identifiable representation of myself, my family, including my Miracle League player/child. I have agreed to the above in consideration of the opportunity given to me by the Miracle League Association to appear in these materials.

Parent/Guardian Signature: _____ Date: _____

Please fax, mail or email your completed application and signed release form to:

Jeanne-Marie Savoy
jmsavoy@miracleleaguecm.org
15881 Airline Highway, Baton Rouge, LA 70810
(225) 293-9375, (225) 293-9378 fax