



# Beautiful People

Adaptive Sports for Children with Disabilities



of Orange County, New York

## Spring Baseball Athlete Registration 2018

Sunday Games at 10 & 11 am depending on team assignment

**5/6, 5/13** 10 & 11 am Town of Wallkill Little League Park, 1 Little League Way, (Scotchtown) Middletown

**5/20 Grand Opening** 1 & 2 pm Games at Wickham Woodlands, NEW fields at 225 State School Road, Warwick

**6/3, 6/10, 6/17, 6/24** 10 & 11 am continue in Warwick. **July Rain Dates** TBD

\_\_\_\_\_  
Players Name (last name first) Home Phone

\_\_\_\_\_  
Street Address City State Zip

\_\_\_\_\_  
Parent / Guardian First Names PLEASE PRINT CLEARLY e-mail address

M/F \_\_\_\_\_ Birthday \_\_\_\_\_ Age \_\_\_\_\_ School \_\_\_\_\_

Diagnosis \_\_\_\_\_

Primary Care Physician \_\_\_\_\_ City \_\_\_\_\_

Does your child/teen have one-on-one aid at school \_\_\_\_\_ How many hours a day? \_\_\_\_\_

Wheelchair \_\_\_\_\_ Walker \_\_\_\_\_ Verbal \_\_\_\_\_ Nonverbal \_\_\_\_\_ Seizures \_\_\_\_\_ If YES, last Date/Note \_\_\_\_\_

Team Shirt Size (Please circle) **Youth:** S M L **Adult:** S M L XL XXL Years of experience \_\_\_\_\_

Team Name from previous year \_\_\_\_\_ Notes \_\_\_\_\_

**I give authorization for my child to participate and do hereby release Beautiful People, Orange County Chapter of Miracle League of any liability for injury that may occur while participating as a player or spectator during the season.**

**I understand that his/her Parent and/or Guardian must be present at all Beautiful People games and/or events.**

(Please initial) \_\_\_\_\_ Cell Phone \_\_\_\_\_

**I hereby** grant Beautiful People, its affiliates, franchisees, 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 player/child. These materials may appear in any form, style color or medium whatsoever (including, without limitation, photographs, videotapes, films sound recordings, software, drawings, prints, broadcast, internet and electronic 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 Beautiful People. **I hereby** release and forever discharge the Beautiful People 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 incorporates my name, voice, likeness or any other identifiable representation of myself, my family including my player/child. **I have agreed** to the above in consideration of the opportunity given to me by Beautiful People, to appear in these materials. I acknowledge that I have fully read and understand this document and that I have had any questions regarding its effect 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.

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_

- Tri-sport package \$125 includes 2018 baseball and 2018 soccer, and 2019 basketball
- Single sport  Baseball \$50  Basketball \$50  Soccer \$75
- FINANCIAL ASSISTANCE Sponsorship for all or part of the fee is available if needed  Received aid last year from Beautiful People

Check enclosed to "Beautiful People"  Payment will be made on \_\_\_\_\_  On-line at [www.beautiful-people.us](http://www.beautiful-people.us)

Mail registration to Beautiful People, 28 Church St, 2A Warwick, NY or FAX 845-986-3351 . Call 845-986-5944

Date rec'd: \_\_\_\_\_ Cash/Check # \_\_\_\_\_ Confirmed \_\_\_\_\_ Team Assign \_\_\_\_\_