

## SEASONAL REGISTRATION

FEES: \$40.00

(Please note: no person will be turned away from participating in the League because of his or her ability to pay the registration fee. Please contact MK at (910) 398 - 2211 or mk@accessilm.org with all financial and/or transportation needs)

Player's First and Last Name	Today's Date
Street Address   City   County   State   Zip Code	
Parent / Guardian	
Parent/Guardian Email Address	
Work or Contact Number	
Male/Female Player Birthday Play	ver Primary Diagnosis
What can the Miracle League of Wilmington staff and volunteers do to make you or your player most successful on the baseball field (example: music volume, use of a tee, directional cues, motivational techniques, etc.)?	
What song choice would you or your player like as their hit Please list the Song Choice Title and Artist Name below.	
New or Returning Player? (Please Circle One)	
New Player    Returning Player	
Please circle one of the following teams you or your player	would like to participate in: (Please Circle One)
Miracle League Tee Ball Team    Classic Miracle League Team	n    Miracle League Competitive Team
What size T-Shirt does your player need? (Please Circle Or	ne)
Y-SM    Y-MD    Y-LG    AD-SM    AD-MD    AD-LG    AD-	XLG    AD-XXLG    AD-XXXLG
Payment Preference:	
Credit Card	
Check	
Cash	