



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 Taylor at (910)398 - 2211 or taylor@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 _____ Player 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 hitting walk-up song?

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 || Miracle League Competitive Team

What size T-Shirt does your player need? (Please Circle One)

Y-SM || Y-MD || Y-LG || AD-SM || AD-MD || AD-LG || AD-XLG || AD-XXLG || AD-XXXLG

Payment Preference:

Credit Card _____

Check _____

Cash _____

Sponsor Another Athlete (circle) YES NO

SPONSOR ANOTHER ATHLETE

Many athletes do not have the funds to participate in fitness opportunities. If you would like to "pay it forward," ACCESS of Wilmington welcomes you to pay for an additional membership to cover the cost of someone who can't. Please allow your payment to denote if you are going to pay it forward.

ALL INDIVIDUALS WILL BE ASKED TO SIGN THE GENERAL LIABILITY FORM (REQUIRED) TO ATTEND & MEDIA RELEASE FORM (OPTIONAL) ATTACHED.