

Miracle League of Northwest Montana

Baseball Volunteer Registration

We are an all-volunteer run program to provide a free, summer baseball program, on a fully accessible field, at the Kidsports complex, for children and adults with a special need or disability of any kind or severity.

Volunteer Opportunities:

Head Coach -Requires full understanding of and ability to teach baseball skills, ability to pitch to players with accuracy and requires experience working with athletes of all abilities. *Available for ages 18+*

Assistant Coach - Requires experience working with athletes of all abilities. *Available for ages 18+*

Buddy - Must be kind and patient and must be able to provide encouragement and direction to athletes so they are able to play at their own best ability. *Available for ages 15+. Ages 12-14 upon approval of Director.*

Concession Stand Coordinator or Assistant- Purchase, prepare and serve Hot Dog/Drink on game nights

Select Day(s) Available or you can volunteer for a specific player _____ or team _____:

Monday Tuesday Wednesday Thursday

We have one hour practice times on Wed/Thurs from 4-8 and 1.5 hour games Mon/Tues from 5-8

Programs Available, select if have a preference:

Ages 3-6 Mini-Miracles Six Week Program on *Mondays 4:15-5pm.*

Ages 6-Adult Recreational League ***All Abilities, New and Returning Players*

Ages 16-Adult Competitive League *Invitational Program in August-September*

Volunteer's Name	Email	Phone Number	Age (if <18)
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Street Address	City	State	Zip Code
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Name and Phone Number of Emergency Contact: _____

I agree, or give authorization for my minor age child, to volunteer in the Miracle League of Northwest Montana, and I hereby release Kidsports and the Miracle League of Northwest Montana from any liability for injury that may occur while participating as a volunteer during the season. I understand that participating in sporting activities includes risk of injury and sometimes death, and I knowingly accept these risks. I have agreed to the above in consideration of the opportunity given to me or my child by Kidsports and the Miracle League of Northwest Montana to participate in its program.

I understand that volunteers will be subject to and required to pass a background check. I acknowledge that I have fully read and understand this Volunteer Registration form. I certify that I have never been convicted of a crime and I am at least 18 years of age, unless this document is also signed by my parent or legal guardian.

Volunteer's Signature: _____ Date: _____

Parent or Guardian Name: _____ Parent or Guardian Signature: _____

(Required if volunteer is under 18)

For additional information:

Director:

Jennifer Johnson (406)-261-0117

Facebook:

www.facebook.com/MiracleLeagueMT

Email / scan registrations to:

miraclaleaguenwmt@gmail.com

Mail registrations to:

Miracle League PO Box 10003 Kalispell, MT 59904