



# Miracle League of Northwest Montana

## Summer Baseball 2026 Player Registration

Miracle League is a free baseball program for individuals with a special need or disability of any severity. All who would like to play are welcome.

Summer Programs Available:

- Ages 3-6 Mini-Miracles\* Six-week program. Mondays 4:15-5 pm on 6/15-7/27 (no 7/13)
- Ages 7+ Skills Club\* Six-week program. Tuesdays 4:15-5 pm on 6/16-7/28 (no 7/14)
- Ages 6-Adult Recreational League All Abilities, New and Returning Players

All programs will provide instruction and play at each individual's unique skills and ability. No prior experience, skills or equipment are needed or expected.

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Player's Full Name	Player/Guardian Email	Phone Number
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Street Address	City	State	Zip Code
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M/F\_\_\_\_\_ Birthday\_\_\_\_\_ Age\_\_\_\_\_

1:1 Assistance / Buddy Needed? Y / N (if Guardian will always provide you may select No)

Note - Please discuss any special accommodations needed with Director Jen or Team Coach

\*Mini-Miracles and Skills Club programs are skills-based programs and are designed for a gentle introduction to baseball skills. Best suited for individuals with more involved special needs and/or those seeking skill development and social opportunity without the competition of games.

### Recreational League Uniforms:

Preferred Shirt Size:\_\_\_\_\_ Adult / Youth. Hat Size: Child or Adult

Team Shirts are available to be borrowed for the season or purchased for \$35:

- I purchased a team shirt last year and will re-use it: Team\_\_\_\_\_ Number\_\_\_\_\_
- I want to purchase a new jersey for \$35, to keep: Preferred Number\_\_\_\_\_
- I will borrow a jersey for the summer and return at the end of the final game.

Team Hats are provided free to first-time participants or when assigned to a new team.

- I am new to the program and need a team hat.
- I wish to purchase a replacement hat for \$20.

Baseball pants are not provided and are optional. Most athletes wear comfortable shorts.

Closed toe tennis shoes are required. Cleats, Sandals, flip flops, boots are NOT allowed.

The program is free for all participants thanks to the generous support of our community. Donations to offset the costs are welcome. League and team sponsorships are available. Please contact Jen for more information or visit <https://givebutter.com/2026MLNWMT>.

**Team Assignments** are loosely made based on school and/or Special Olympics team placement. We try our best to accommodate needs for transportation and friendships/family relationships.

School / Special Olympics Team / Current Program: \_\_\_\_\_

- I am a returning player: My last team assignment was: \_\_\_\_\_
- I request placement with: \_\_\_\_\_ (individual or team name)

Higher skilled adult athletes may be invited to participate in an extended competitive season.

**Teams will be announced at the Opening Ceremonies on June 8<sup>th</sup> at 5 pm**

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**Waivers and Regulations:**

- I agree and give authorization for the athlete listed below to participate in the Miracle League of Northwest Montana, and I hereby release the Miracle League of Northwest Montana, Kidsports Inc. and the City of Kalispell from any liability for injury that may occur while participating as a player, volunteer or spectator during the season.
- I understand that participating in sporting activities includes risk of injury and sometimes death, and I knowingly accept these risks.
- I understand that all minors must be accompanied by parent or guardian, **who must remain at the Miracle Field site during practices and games**, and who are encouraged but not required to assist in the dugout or on the field.
- I understand that if athlete has challenging behaviors, continued participation will require the parent or guardian to always remain with the athlete.
- I understand that in case of an injury that the parent / guardian / emergency contact will be contacted as soon as possible, but if urgent that emergency services will be called.
- I have agreed to the above in consideration of the opportunity given to me or my child by the Miracle League of Northwest Montana to participate in the program.
- I acknowledge that I have fully read and understand this Registration form. I certify that I am at least 18 years of age and legally able to sign, unless this document is also signed by my parent or legal guardian.

Player's Printed Name \_\_\_\_\_ Player's Signature \_\_\_\_\_

Parent or Guardian Name \_\_\_\_\_ Parent or Guardian Signature \_\_\_\_\_  
(required if under 18 or under legal guardian / conservatorship)

Name and Phone Number of Emergency Contact: \_\_\_\_\_

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For additional information:

Director: Jennifer Johnson (406) 261-0117  
Facebook: [www.facebook.com/MiracleLeagueMT](http://www.facebook.com/MiracleLeagueMT)  
Email / scan registrations to: [miracleleaguenwmt@gmail.com](mailto:miracleleaguenwmt@gmail.com)  
Mail registrations to: Miracle League NW MT PO Box 10003 Kalispell, MT 59904

**We are always in need of Coaches, Volunteers and Corporate or Individual Sponsorships.**