

FOR YOUTH DEVELOPMENT® FOR HEALTHY LIVING FOR SOCIAL RESPONSIBILITY



The Johnson Family of Companies

MIRACLE LEAGUE

There's just something about baseball that lights up a kid's eyes!

It's an experience that every kid deserves...and through the Miracle League it's an experience that every kid can enjoy. The Miracle League is a baseball program for kids with physical and developmental disabilities. The Miracle League offers these special kids the opportunity to break through the perceived boundaries of their disabilities, while making new and lasting friendships and having fun.

The Miracle League has three special rules:

Every player gets a hit • Every player gets on base • Every player scores

Kids with special needs aren't the only ones who benefit:

Through the Volunteer Buddies program, able-bodied members of the community are partnered with Miracle League players to provide playing assistance, encouragement and friendship.



Kids with physical and developmental disabilities, 3-19 years old

When

Spring/Summer

Wednesday, May 12th - July 7th; 5:30-6:30pm *Buddies please arrive by 5:00pm

Fall

Wednesday, September 1st - October 13th; 5:30-6:30pm *Buddies please arrive by 5:00pm

Where

Games are played on the Rotary Miracle Field, located at the Kenosha YMCA. Custom-designed, with a cushioned synthetic turf surface, the Miracle Field accommodates wheelchairs & walking assistance devices.

Josh Thompson, Sports Coordinator at 262.654.9622 ext. 204. Registration form ON THE BACK; forms should be turned in at the Kenosha YMCA Member Service Desk.

Member & General Public

This program is offered at **no cost** to the participant.

SPECIAL THANKS TO THIS YEARS SPONSORS!











Kenosha News ● First American Bank ● Pepsi









				MEMBER / NON-MEMBER
LAST NAME		PARTICIPANTS' FIRST NAM	ME	
MAILING ADDRESS		CITY	STATE	ZIP
MALING ADDRESS	MALE / FEMALE		SIMIL	211
DOB AGE	PINCE / TENNEL			
HOW DID YOU HEAR ABOUT OUR PROGRAM				
CURRENT GRADE LEVEL: K 1 2	3 4 5 Middle School	High School	School:	
T-SHIRT SIZE: YOUTH S (6/8) M (10/12) L (14/16) ADI	ULT S M L XL	2XL	
	, _ (,, ,)			
DIAGNOSIS				
OTHER SPECIAL NEEDS OF PEOUIDEMENTS				
OTHER SPECIAL NEEDS OR REQUIREMENTS R S				
S				
Wheelchair: YES NO	Walker: YES NO Ot	ther:		
NOTE: All buddies over the age of 18 are subject	to a background check. If not attached, fo	orms are available at the Ke	nosha YMCA.	
D				
D PREVIOUS TRAINING / RELATED EXPERIENCE				
E S				
_				
E				
PARENT / GUARDIAN NAME (if under 18)	HOME PHONE		WORK PHONE	
E	HOME PHONE			a Valuntaar Buddy, VEC NO
N C C CELL PHONE	EMAIL ADDRESS		i would like to be	a Volunteer Buddy: YES NO
N NAME	RELATIONSHIP TO VOLUNTEER		HOME PHONE	
C C			I would like to be	a Volunteer Buddy: YES NO
CELL PHONE	EMAIL ADDRESS			

PHOTO/TALENT RELEASE: I hereby irrevocably release, consent and authorize the Kenosha YMCA and its agents to use my photo/likeness/voice, as it pertains to my participation with the Kenosha YMCA, in any manner for promotional efforts without expectation of or right to any reimbursement in connection with its use.

CONSENT TO MEDICAL TREATMENT: As the parent or legal guardian of the above named registrant, I hereby give consent for emergency medical care prescribed by a duly licensed Doctor of Medicine or Doctor of Dentistry. This care may be given under whatever conditions are necessary to preserve life, limb, or well being of my dependent.

SI	GN	ATI	JRE	AND	DAT	E:
----	----	-----	------------	-----	-----	----