



Dothan Miracle League Spring 2012 Volunteer Application



For additional information please call: (334) 797-0746

Shirt Size - Youth: S M L XL Adult: S M L XL XXL XXXL (please circle one)

- Head Coach
- Assistant Coach
- Buddy

Name Date of Birth

Street Address City County State Zip Code

Home Phone E-mail Work or Contact Number(s)

Buddy: Are you 12 years or older: Yes No

Coaches: Are you over 20 years of age: Yes No

I would like to buddy with the same athlete as last year? Yes No Athlete Name: _____

How long have you been a resident in Dothan or Houston County? _____

Coaches: What experience do you have in working with the public? _____

Describe any specific skills or training that is directly related to the sport you are volunteering for: _____

I hereby certify that all statements made by me in this application are true and correct to the best of my knowledge. I understand that I will be subject a background check. I also understand that I must abide by the policies and rules as set by the Department of Leisure Services. I fully understand and agree to these conditions.

I agree to waive and release any rights and claims for damages against the Miracle League Association of Dothan, the City of Dothan, and Dothan Leisure Services, sponsors, employees, their representatives and officials for any and all injuries arising out of participation in the program.

I certify that I am at least 20 years of age, unless this document is also signed by my parent or legal guardian.

Applicant Signature Date

Parent/Guardian Signature (if buddy is 18 years or under) Date

Mail Registration to: Dothan Leisure Services
c/o Therapeutics
P.O. Box 2128
Dothan AL 36302
or E-Mail Registration Form to: broallen@gbcdothan.org