What is the Brewers Grand Slam Teacher of the Month Program

Grand Slam Teacher of the Month program recognizes teachers from all grade levels and disciplines who are improving student achievement, using innovative strategies in the classroom, and making a difference in the lives of their students. One winner will be selected each month during the season from April-September.

Purpose of the Program

Teachers change the lives of millions of children every day, and their work and impact extends far beyond the boundaries of the classroom. They play a pivotal role in our children’s lives, inspiring a lifelong love of learning and discovery and making a difference in their well-being and long-term success. Let’s show thanks and gratitude to stellar educators by nominating a teacher for all that they do to help our children reach for the stars.

How Are Winners Acknowledged?

The winner will receive four game tickets to a pre-selected game, on-field acknowledgement and the opportunity to throw out a ceremonial first pitch prior to the game, along with a Grand Slam Teacher certificate, a gift bag filled with Brewers memorabilia and a monetary donation will be made to help cover some of their classroom costs.

Who is Eligible to Participate?

All educators throughout the State of Wisconsin are eligible to participate in the Grand Slam Teacher Award program.

How to Nominate a Teacher?

Students, educators, parents, community leaders, and fans can nominate a Grand Slam teacher online at www.brewers.com/community or pick-up a nomination form at the Guest Relations Booth located on the Field Level Concourse at Miller Park.
Grand Slam Teacher Nomination Form

Your Name: ___________________________ Phone: ___________________________

Email Address: ___________________________________________________________

Teacher Nominee:

Nominee: ___________________________ Phone: ___________________________

Email Address: ___________________________________________________________

School Name: ___________________________ Teaching Grade Level(s): __________

Address: ________________________________

City: _______________________ State: WI Zip: _______________________

In the space below, tell us…
WHY SHOULD THIS PERSON SHOULD BE RECOGNIZED AS A GRAND SLAM TEACHER?
Tell how the teacher is improving student achievement, using innovative strategies in the classroom, and making a difference in the lives of their students. (Use another sheet of paper, if needed)

__________________________________________________________________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________

All sections of this nomination form must be filled out completely and mailed to:

Milwaukee Brewers
c/o Grand Slam Teacher Award Program
One Brewers Way
Milwaukee, WI 53214

or email from to Erica.Bowring@brewers.com
PHOTO/IMAGE WAIVER AND RELEASE

I, _______________ hereby agree on behalf of myself, my heirs and assigns that, by signing below (or causing my guardian to sign below), I authorize the Milwaukee Brewers Baseball Club and all Major League Baseball-related entities to depict in perpetuity my likeness, image, name, nomination form, name, signature, and other indicia of my rights of publicity ("Images") in photographic or other works appearing in any and all media for purposes of promoting, advertising, or marketing current or future events related to baseball generally, the Milwaukee Brewers Baseball Club or Major League Baseball, and I agree that such Images may be used by the above-named entities for such purposes without any compensation or further grant of rights whatsoever.

I, __________________________ a legal adult, age 18 or older, have read and understand the above and acknowledge that I am waiving rights that I might otherwise have by signing this document.

Name: ______________________________
Signature: ____________________________
Date: ________________________________

Consent for Parent/Guardian of Minor

I, _______________ hereby acknowledge and warrant that I am the parent or legal guardian of _______________________, that I have read the foregoing and agree to each of its terms on behalf of myself and my minor child.

Name: ______________________________
Signature: ____________________________ Date: __________________________