



League Safety Officer Manual

League Name Lake Elsinore Little League

League # 405 - 28 - 12



LAKE ELSINORE LITTLE LEAGUE

2021

SAFETY MANUAL



Safety Officer
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Introduction

Safety is a Good Baseball Skill

ASAP (A Safety Awareness Program) was introduced to Little League in 1995, with the goal of reemphasizing the position of Safety Officer “to create awareness, through education and information, of the opportunities to provide a safer environment for kids and all participants of Little League Baseball”.

The Lake Elsinore Little League Safety Manual is offered as a tool to place some important information at Manager and Coach’s fingertips.

The following is information pertaining to coaches, parents and players with regards to issues of safety. A more complete description can be found in the Safety Manual and Little League Baseball 2021 Official Regulations and Playing Rules Book. All teams are required to enforce all Little League Rules.

SAFETY CODE FOR LITTLE LEAGUE

- Responsibility for safety procedures should be that of an adult member of the local league.
- Arrangements should be made in advance of all games and practices for emergency medical services.
- Managers, coaches and umpires should have some training in first-aid. First-Aid Kit should be available at the field.
- No games or practice should be held when weather or field conditions are not good, particularly when lighting is inadequate.
- Play area should be inspected frequently for holes, damage, glass and other foreign objects.
- Dugouts and bat racks should be positioned behind screens.
- Only players, managers, coaches and umpires are permitted on the playing field during play and practice sessions.
- Responsibility for keeping bats and loose equipment off the field of play should be that of a regular player assigned for this purpose.
- Procedure should be established for retrieving foul balls batted out of the playing area.
- During practice sessions and games, all players should be alert and watching the batter on each pitch.
- During warm up drills, players should be spaced so that errant balls endanger no one.
- Equipment should be inspected regularly. Make sure it fits properly.
- Pitching machines, if used, must be in good working order (including extension cords, outlets, etc.) and must be operated only by adult managers and coaches.
- Batters must wear protective NOCSAE helmets during practice, as well as during games.
- Catchers must wear catcher’s helmet (with face mask and throat guard), chest protector and shin guards. Male catchers must wear long-model chest protector (divisions below Junior/Senior/Big League), protective supporter and cup at all times.
- Except when runner is returning to a base, headfirst slides are not permitted. This rule applies to Little League (Majors)/Minor and Tee Ball.
- During sliding practice bases should not be strapped down.
- At no time should “horse play” be permitted on the playing field.
- Parents of players who wear glasses should be encouraged to provide “Safety Glasses.”
- Players must not wear watches, rings, pins, jewelry or other metallic items.
- Catchers must wear catcher’s helmet, facemask and throat guard in warming up pitchers. This applies between innings and in bull pen practice. Skullcaps are not permitted.
- Batting/catcher’s helmets should not be painted unless approved by the manufacturer.
- Regulations prohibit on-deck batters. This means no player should handle a bat, even while in an enclosure, until it is his/her time at bat. This rule applies to Little League (Majors)/Minor and Tee Ball.
- Players who are ejected, ill or injured should remain under supervision until released to the parent or guardian.

Manager’s Safety Reminder

Remember, safety is everyone’s job. Prevention is the key to reducing accidents to a minimum. Report all hazardous conditions to the Safety Officer or another LELL Board Member Immediately. Don’t play on a field that is not safe or with unsafe playing equipment. Be sure your players are fully equipped at all times, especially catchers and batters. And don’t forget to check your team’s equipment often.



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SAFETY MANUAL



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SAFETY MANUAL ATTACHMENT ITEMS

- **Injury/Accident Notification Form**
- **Claim Form Instructions**
- **Treatment of Dental Injuries**
- **Incident/Injury Reporting Form**
- **Volunteer Application Form – 2021**
- **Returning Volunteer Application Form – 2021**
- **Little League Medical Release Form**
- **Acknowledgement of Receipt and Review of the League Safety Manual & First Aid Kit**
- **LELL Codes of Conduct**
- **LELL Safety Code Certification Form**
 - **Team Roster**
 - **Parents & Spectators**
 - **Players**
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- **Suggested Warm Up Drills**
- **Keep It Clean!**
- **Hey Coach!**
- **Manager/Coaches Safety Notes**



LAKE ELSINORE LITTLE LEAGUE PHILOSOPHY

Teaching and learning the game of baseball in a safe and nurturing environment where children are free and encouraged to develop their athletic, intellectual and social skills through teamwork, fair play and sportsmanship. The opening paragraph of the Lake Elsinore Little League Constitution elaborates on this and provides that "[The] objective of the League [is] to implant firmly in the children of the community the ideals of good sportsmanship, honesty, loyalty, courage and respect for authority, so that they may be well adjusted, stronger and happier children and will grow to be good, decent, healthy and trustworthy citizens." All coaches, parents and children will be held to a high standard of moral and ethical character. ALL should be role models and should act in a manner consistent with such standards.

ASAP SAFETY PLAN

As one measure to further our mission, Lake Elsinore Little League and Little League International have adopted ASAP (A Safety Awareness Program) to improve and continue to provide a safer environment for all participants in Little League Baseball.

The Lake Elsinore Little League Safety Manual outlines specific safety issues, league procedures and safety guidelines. All participants, volunteers, employees and spectators are bound by the guidelines set forth in this manual. Printed copies of this manual can be found in the Snack Bar next to Matich Field, and on-line in the safety section on our website (www.lakeelsinorelittleleague.com).

THE ROLE OF THE SAFETY OFFICER

The safety officer is a member of the Lake Elsinore Little League Board of Directors, appointed to be the primary point of contact for the execution of the safety plan. The safety Officer's responsibilities include modifying the leagues safety manual on an annual basis, coordinating a safety clinic for all managers and coaches, completing an annual facility survey, reviewing all practice and game field for potential safety hazards and communicating with our local district and Little League International regarding any safety concerns.

Safety Plan Manual Copy Distribution

President, Safety Officer, Secretary, District Administrator, Snack Bars (2)



VOLUNTEER APPLICATIONS & BACKGROUND CHECKS

As a condition of service to Lake Elsinore Little League, all Managers, Coaches, Board of Director members, and other persons deemed by the Lake Elsinore Little League Board of Directors to have repetitive access or contact with players or teams must complete and submit an official League Volunteer Application, which is processed through JDP electronic background check services. Lake Elsinore Little League Volunteers are required to fill out either the “2021 Little League Volunteer Application” or the “2021 Returning Volunteer Application”. (See attachments on page 68 and 69).

As a condition of volunteering, volunteers give permission for the Lake Elsinore Little League organization to conduct a background check, which may include a review of sex offender registries, child abuse and criminal history records.

Per Little League International policy, Lake Elsinore Little League must at a minimum use the National Sex Offender Public Registry to check volunteers. Lake Elsinore Little League has chosen to utilize First Advantage for background checks. First Advantage is Little League’s recommended background check service and exceeds Little League’s minimum requirements. The First Advantage site provides searches of available criminal records from various repository sources and state level Sex Offender Registries across the 50 states and the District of Columbia.

Volunteers must submit and have their application approved by the League President before starting volunteer duties with Lake Elsinore Little League. Applications will be retained by the League Safety Officer in a secure location for the duration of the applicant’s service to the League for that year.

SUBMISSION OF LEAGUE PLAYER REGISTRATION DATA

League player registration data and coach and manager data will be submitted via the Little League Data Center at www.LittleLeague.org.

MEDICAL RELEASE FORMS

Parents fill out and sign our Lake Elsinore Little League medical release forms when they register their child on-line. Our form is consistent with the LL Baseball Medical Release (see attachments). Each Manager is sent copies of these medical releases and **MUST** keep COPIES on hand at every practice and game. No player may participate



in ANY practice or game without having completed a Medical Release Form.

REVIEW OF LEAGUE SAFETY MANUAL & FIRST AID KIT

Each manager must complete the Acknowledgment of Receipt and Review of the League Safety Manual and First Aid Kit and turn it into the League President prior to the first practice. (See attachment.) The Lake Elsinore Little League Safety Manual is posted on the League website and copies are available in the Snack Bar next to Match Field. It contains a duplicate copy of the League Safety Code and other important information.

LAKE ELSINORE LITTLE LEAGUE SAFETY CODE

SAFETY IS EVERYONE'S RESPONSIBILITY!

The Lake Elsinore Little League Safety Code MUST be discussed with all managers, coaches, players, and parents at the initial team meeting. Examples of how these guidelines come into play should also be discussed. Managers, coaches and all players MUST complete and sign the Safety Code Certification Form stating that they understand and agree to comply with the Safety Code. (See attachment) The form must be turned into the Safety Officer or Player Agent. It is the responsibility of the team manager to ensure that players and coaches comply with Safety Code regulations.

The Board of Directors of Lake Elsinore Little League has mandated the following Safety Code:

- Responsibility for safety procedures belongs to every adult member of Lake Elsinore Little League.
- Each player, manager, designated coach, umpire, team safety officer shall use proper reasoning and care to prevent injury to him/herself and to others.
- Only league approved managers and/or coaches are allowed to practice teams.



- Only league-approved managers and/or coaches will supervise Batting Cages.
- Arrangement should be made in advance of all games and practices for emergency medical services.
- Managers, Designated Coaches and Umpires will have mandatory training in First Aid.
- First-aid kits are issued to each team manager during the pre-season and additional kits will be located at each snack bar.
- No games or practices will be held when weather or field conditions are poor, particularly when lighting is inadequate. Play area will be inspected before games and practices for holes, damage, stones, glass and other foreign objects. Any deficiencies shall be reported promptly to the Umpire (if during a game) and to the Lake Elsinore Little League Field Maintenance Director and the Lake Elsinore Little League Safety Officer.
- Team equipment should be stored within the team dugout or behind screens, and not within the area defined by the umpires as “in play.”
- Only players, managers, coaches and umpires are permitted on the playing field or in the dugout during games and practice sessions.
- Responsibility for keeping bats and loose equipment off the field of play should be that of a player assigned for this purpose or the team’s manager and designated coaches.
- Foul balls batted out of playing area will be returned to a coach and not thrown over the fence.
- During practice and games, all players should be alert and



watching the batter on each pitch.

- During warm-up drills, players should be spaced so that no one is endangered by wild throws or missed catches.
- All pre-game warm-ups should be performed within the confines of the playing field and not within areas that are frequented by, and thus endangering spectators (i.e., playing catch, pepper, swinging bats etc.)
- Equipment should be inspected regularly for the condition of the equipment as well as for proper fit.
- Batters must wear Little League approved protective helmets that bear the NOCSAE seal during batting practice and games. No stickers, paint or other alterations may be placed on or made to the helmets.
- Except when a runner is returning to a base, head-first slides are not permitted.
- During sliding practice, bases should not be strapped down or anchored.
- At no time should “horse play” be permitted on the playing field.
- Parents of players who wear glasses should be encourage to provide “safety glasses” for their children.
- On-deck batters are not permitted. Only the batter leading off the inning is allowed outside the dugout in between innings while warm up pitches are being thrown. That batter may only step up to the plate when directed to by the umpire.
- Managers will only use the official Little League balls supplied by Lake Elsinore Little League.
- Once a ball has become discolored, it will be discarded.



- All male players will wear athletic supporters during all practices and all games.
- Male catchers must wear the metal, fiber or plastic type cup and a chest protector.
- Female catchers must wear long or short model chest protectors.
- All catchers must wear chest protectors with neck collar, throat guard, shin guards and catcher's helmet, all of which must meet Little League specifications and standards.
- All catchers must wear a mask, "dangling" type throat protector (even on a "hockey" style mask) and catcher's helmet during practice, pitcher warm-up, and games. Note: Skullcaps are not permitted.
- Shoes with metal spikes or cleats are not permitted. (Junior Division Permitted) Shoes with molded cleats are permissible.
- Players will not wear watches, rings, pins, jewelry or other metallic items during practices or games. (Exception: Jewelry that alerts medical personnel to a specific condition is permissible and this must be taped in place.)
- No food or drink at any time, in the dugouts. (Exception: bottled water, sunflower seeds, Gatorade and water from drinking fountains.
- Catchers must wear a catcher's mitt (not a first baseman's mitt or fielder's glove) of any shape, size or weight consistent with protecting the hand.
- Catchers may not catch, whether warming up a pitcher, in practices, or in games, without wearing full catcher's gear and an athletic cup as described above.



- Managers will never leave an unattended child at a practice or game.
- No children under the age of 15 are permitted in the Snack Bar.
- No persons under the age of 18 may assist in practices or games unless they are a League registered player, and then only with their own team.
- Never hesitate to report any present or potential safety hazard to the Lake Elsinore Little League Safety Officer immediately.
- Make arrangements to have a cellular phone available when a game or practice is at a facility that does not have public phones.
- Speed Limit is 5 miles per hour in roadways and parking lots.
- No alcohol or drugs allowed on the premises at any time.
- No medication will be taken at the facility unless administered directly by the child's parent. This includes any type of aspirin and Tylenol. Managers and coaches are not permitted to administer medication to any child.
- No playing in parking lots at any time.
- No smoking is permitted at the field complex or grounds at any time (including but not limited to vape or electronic cigarettes).
- No swinging bats or throwing baseballs at any time within the walkways and common areas of the complex. Players may not swing bats near other persons.
- No throwing rocks.



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- No climbing fences.
 - No swinging on dugout roofs.
 - No pets are permitted on the fields at any time.
 - Observe all posted signs.
 - All Pitching Machine Rules must be strictly adhered to.
 - Players and spectators should be alert at all times for foul balls and errant throws.
 - All gates to the fields must remain closed at all times. After players have entered or left the playing field, gates should be closed and secured.
 - Use crosswalks when crossing roadways. Always be alert for traffic.
 - No bicycles, skateboards, scooters, etc. may be ridden on Lake Elsinore Little League grounds.
 - No one is allowed on the complex with open wounds at any time. Wounds should be treated and properly bandaged.



PITCHING MACHINE RULES

1. There must be two coaches present to use the pitching machine.
2. No more than four players can be picking up baseballs at a time.
3. All players inside the cage must wear batting helmets.
4. No person under 18 years old may operate the pitching machine.
5. Only use authorized baseballs, softballs, or dimpled training balls in the machine.
6. Any person operating the machine will strictly observe the speed settings and ratios posted on the machine by the manufacturer.
7. The machine will not be operated without a second perpendicular screen positioned to restrict access to the machine by any player from the side.
8. When using a pitching machine on the field, the machine will be placed in a stable position and the power cord will be managed so players are not able to run over exposed power cord.
9. Always read and adhere to all manufacturer warnings and instructions on the machine.
10. All rules and manufacturer warnings and instructions should still be adhered even when using a pitching machine in a Manager/Coaches Home.



EQUIPMENT INSPECTION

Helmets

- Must be N.O.C.S.A.E. approved and the approval seal must be visible.
- Must not be painted - this includes nail polish or white-out.
- Must have a fully readable exterior warning label that must be legible (Clear tape over the label will help).
- Must be inspected before each game or practice for cracks and proper padding.

Bats

- Must be inspected before each game or practice for dents, cracks, and flat spots.
- No altered bats, this includes painted or engraved bats.
- Little League Baseball - No more than 33 in. in length, not more than 2 5/8" in diameter.
- Junior and Senior Baseball - No more and 34 in. in length, not more than 2 5/8" in diameter.
- Any bat that meets these specifications and is stamped "USA Baseball Approved" by the manufacturer is acceptable.

Catcher's Gear

- Must include a chest protector with neck collar (long model required in Little League baseball), shin guards, catchers helmet, mask and throat protector at all times (Check to make sure the straps are not loose or torn).

Shoes

- For all Minor Divisions and Major Division - No metal spikes or cleats are permitted. Rubber or molded plastic soles are acceptable.
- Juniors Division – Metal Spikes are permitted.



All Players

- Must wear athletic supporter (male players). Male catchers are to also wear protective hard cup.

Damaged Equipment

- Damaged equipment needs to be reported to the Safety Officer or Equipment Manager (contact information on Page 17).





LAKE ELSINORE LITTLE LEAGUE CONTACTS

2020 – 2021 BOARD OF DIRECTORS

President j.huerta@lellbaseball.org	Jovanny Huerta
Vice-President d.crumrine@lellbaseball.org	Dean Crumrine
Secretary a.gomez@lellbaseball.org	Andrea Gomez
Treasurer a.swick@lellbaseball.org	Ashley Swick
Player Agent a.gomez@lellbaseball.org	Andrea Gomez
Safety Officer j.carlile@lellbaseball.org	Jamie Carlile
Information Officer e.gonzalez@lellbaseball.org	Evan Gonzalez
Manger & Coaching Coordinator j.bray@lellbaseball.org	Jason Bray
Sponsorship/Fundraising Manager v.hoffstaetter@lellbaseball.org	Veronica Hoffstaetter
Concession Manager a.whittle@lellbaseball.org	Amber Whittle
Umpire In Chief (UIC) m.hernandez@lellbaseball.org	Mike Hernandez
Equipment Manager j.whittle@lellbaseball.org	John Whittle
Field Maintenance j.gomez@lellbaseball.org	Joey Gomez
Member At Large v.huerta@lellbaseball.org	Veronica Huerta



Mailing Address

Lake Elsinore Little League
P.O. Box 729
Lake Elsinore, CA
92531

Other Little League Contacts

Little League District 28
Carlos Gamez
District Administrator
Carlos.Gamez@ca28littleleague.org

Little League Support Contacts

LL Regional Office West Region
6707 Little League Drive
San Bernardino, CA 92407
909-887-6444 Phone
909-887-6135 Fax

Little League International Office
PO Box 3485
Williamsport, PA 17701
570-326-1921 Phone
570-322-2376 Fax

Or

539 Route 15 Hwy.
S. Williamsport, PA 17702



EMERGENCY PHONE LIST

LAKE ELSINORE LITTLE LEAGUE

Emergency Numbers

- Police / FIRE / EMT 911
- Poison Control Center 800-222-1222

Non-Emergency Numbers

- Police Non-Emergency 951-245-3300
- Cal FIRE Department (Station 10) 951-674-2161
410 W. Graham Ave.
Lake Elsinore, CA 92530

Utilities

- Southern California Gas Co. 800-427-2200
- EVM Water District 951-674-3146

Area Hospitals

- Inland Valley Medical Center 951-677-1111
36485 Inland Valley Dr.
Wildomar, CA. 92595
- Temecula Valley Hospital 951-331-2200
31700 Temecula Pkwy
Temecula, CA. 92592



MANAGERS SAFETY RESPONSIBILITIES

FIRST AID TRAINING

All managers and coaches must be trained in First Aid at least once every three years. This is a requirement of Little League International. No manager or coach will be allowed to participate in a practice or a game until they have been trained in First Aid (by a professional) this year or in one of the prior two years. Lake Elsinore Little League will keep a log of the dates of completion of training, but it is the responsibility of the team manager to make sure that he/she and coaches have attended a proper training class. Lake Elsinore Little League Or District 28 wide training course.

COACHING CLINICS / MANAGERS MEETINGS

All managers and coaches must attend a LE Little League sponsored coaching/rules clinic annually. It is an opportunity to learn coaching techniques, drills, practice regimens, rules and coaching philosophy. No manager or coach will be allowed to participate in a practice or a game unless they have attended a coaching clinic this year or in one of the prior two years. Lake Elsinore Little League keeps a log of the attendance of all managers and coaches and will enforce this rule.

For the 2020 Season a Lake Elsinore LL Manager Meeting was provided on Saturday, January 25, 2020 at Swick/Match with Instruction by the BOD for LELL.

For the 2020 Season a District 28 Rules Clinic was provided on Wednesday, February 12, 2020, with instruction by LELL President and Safety Officer.

For the 2020 Season a District 28 Umpire Clinic was provided on Saturday, February 15, 2020, with instruction by District 28 UIC Officials.

For the 2020 Season a District 28 Scorekeeper Clinic was provided on Tuesday, February 25 2020, with instruction by LELL President and Safety Officer.

For the 2019 Season a Lake Elsinore LL Managers Mt. was provided on Saturday, January 26, 2019, with Instruction by the Board of Lake Elsinore Little League.



For the 2019 Season a District 28 Rules Clinic was provided on Sunday, February 17, 2019 with instruction by District 28 UIC Officials.

For the 2019 season, Lake Elsinore Little League Players' Clinic was provided on February 23, 2019, with instruction by Lakepoint HS Baseball Boosters.

PARENTS MEETINGS

It is the responsibility of every manager to hold parent meetings with the player's parents. This is a good opportunity to introduce yourself and the coaching staff as well as lay the groundwork for a successful season. Request a team parent(s) or designate player's parent(s) or guardians to represent the team.

In addition to the meet and greet portion of the meeting you will need to discuss the following:

(a) Parents Code of Conduct – It is important that every parent understands what is expected of him or her during practices and during the season.

(b) Managers are not day care providers – It is important to let the parents know that one parent or guardian should be present at every practice and game. Problems arise during the season and it is easier to handle the problem when a parent or guardian is around.

(c) Safety – Explain to the parents and guardians the step taken to ensure that each child get the safest most enjoyable experience they can.

(d) League Rules – Explain the rules of the league to better prepare the parents/guardians for the coming season. Explain how the batting order is done as well as how positions are chosen to help the parents/guardian understand how North Andover Little League Baseball stresses fairness and equal time.



Medical Release Form – Every Parent or Guardian must fill out the Medical Release Form attached (see page 23). This form is an authorization to treat the child in the absence of a parent or guardian. It also lists medical issues and medicines being taken to help assist the emergency medical personnel if the situation ever arises. Once filled out, the forms must be taken to each game and practice by the Manager.



Little League Baseball and Softball MEDICAL RELEASE



NOTE: To be carried by any Regular Season or Tournament Team Manager together with team roster or International Tournament affidavit.

Player: _____ Date of Birth: _____ Gender (M/F): _____

Parent (s)/Guardian Name: _____ Relationship: _____

Parent (s)/Guardian Name: _____ Relationship: _____

Player's Address: _____ City: _____ State/Country: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Mobile Phone: _____

PARENT OR LEGAL GUARDIAN AUTHORIZATION: Email: _____

In case of emergency, if family physician cannot be reached, I hereby authorize my child to be treated by Certified Emergency Personnel. (i.e. EMT, First Responder, E.R. Physician)

Family Physician: _____ Phone: _____

Address: _____ City: _____ State/Country: _____

Hospital Preference: _____

Parent Insurance Co: _____ Policy No.: _____ Group ID#: _____

League Insurance Co: _____ Policy No.: _____ League/Group ID#: _____

If parent(s)/legal guardian cannot be reached in case of emergency, contact:

Name	Phone	Relationship to Player

Name	Phone	Relationship to Player

Please list any allergies/medical problems, including those requiring maintenance medication. (i.e. Diabetic, Asthma, Seizure Disorder)

Medical Diagnosis	Medication	Dosage	Frequency of Dosage

Date of last Tetanus Toxoid Booster: _____

The purpose of the above listed information is to ensure that medical personnel have details of any medical problem which may interfere with or alter treatment.

Mr./Mrs./Ms. _____
Authorized Parent/Guardian Signature Date: _____

FOR LEAGUE USE ONLY:

League Name: _____ League ID: _____

Division: _____ Team: _____ Date: _____



Managers Will:

1) Practice

- Walk the practice field to ensure a safe playing field. Notify the Safety officer immediately if the field is unsafe for practice.
- Make sure that the equipment is in good working order and is safe.
- Make sure players are wearing the proper equipment and any catchers are wearing a cup.
- Not expect more from their players than what the players are capable of.
- Be open to ideas, suggestions or help
- Always have First-Aid Kit, Medical Release Forms, Emergency Contact List, and Safety Manual on hand.
- Enforce the rule that no bats and balls are permitted on the field until all players have done their proper stretching.
- Have players perform stretching exercises before they take the field. Perform stretching exercises for:
 - Calves / Hamstrings
 - Back
 - Midsection
 - Neck and Shoulders
 - Arms
- Have players do a light jog around the field before starting throwing warm-ups that should follow this order.
 - * Light tosses short distance.
 - * Light tosses medium distance.
 - * Light tosses large distance.
 - * Medium tosses medium distance.
 - * Regular tosses medium distance.
 - * Field ground balls.
 - * Field pop flies.



Teach the *fundamentals* of the game to players. Guidelines you can use are:

General Inattention

- Going one step back to the “whys” of most ball handling accidents, it appears that inattention due to inaction or boredom is an underlying accident cause with which we must deal. This situation can be partly offset by using idle time to practice basics of skillful and safe play, such as:
 - Otherwise idle fielders should be encouraged to “talk it up.” Plenty of chatter encourages hustle and enthusiasm.
 - Players waiting for a game or practice to start can pair off and play catch to improve their basic eye-on-the ball technique.
 - Practice should include plenty of variety in the drill work.
 - Put a time limit on each drill and do not hold the total practice for more than two hours, or less if interest begins to lag.
 - Idle players along the sidelines can be given the job of studying the form of other players to improve their own techniques. They may then report on what they have learned to improve their own form on running, ball handling, throwing, batting and sliding.

Catching Drills

- When the catcher is wearing the required protection, the greatest exposure is to the ungloved hand. The catcher must learn to:
 - (a) Keep it relaxed.
 - (b) Always have the back of the throwing hand toward the pitcher when in position to catch.
 - (c) Hold all fingers in a cupped position near the mitt, ready to trap the ball and throw it.
- The catcher should also be taught to throw the mask and catcher’s helmet in the direction opposite the approach in going for a high fly.
- As the catcher learns to play this difficult position, a good habit is to keep a safe distance back from the swinging bat. Estimate this as one foot farther from the batter than the ends of the outstretched fingers.
- To repeat, the best protection is keeping the eye on the ball.



Sliding Drills.

- As is the case with other baseball fundamentals, a correct slide is also a safe one. It is well, too, to guard against the accident of a collision and the possibility of a player being struck by a thrown ball as that player “hits the dirt. The following can make the learning period safer:
 - Long grass has been found to be better than a sand or sawdust pit to teach sliding.
 - The base must not be anchored down.
 - Sliding pads are recommended.
 - The player should make approaches at half speed and keep constantly in mind that hands and feet should be in the air. Once committed to slide, the player must not change strategy. Last minute hesitation causes most sliding injuries.
 - Tennis shoes are suggested for beginning sliding and tagging practice to avoid injury to the defensive player.
 - If the ground along the baselines becomes soft on a rainy day, such weather offers an excellent opportunity to have sliding drills.
 - It should be kept in mind that head-first sliding* is not recommended except when returning to a base.

Batter Safety

- A batter’s greatest accident exposure is from the unsafe acts of others, namely wild pitches, which account for a major portion of all accidents. Again, the best defense is an alert, confident concentration on the ball. This type of injury is more prevalent in Regular than in Minor League play. Since the danger is increased as pitchers learn to throw with greater force and as more games are played, it is doubly important to take whatever counter measures necessary to offset this exposure.
- A well fitted, NOCSAE approved helmet is the first requirement.
- The development of the novice batter’s ability to take evasive action can be improved by getting the player to relax and concentrate on the ball from the time the pitcher starts delivery until it lands in the catcher’s mitt. Players with slow reflexes can also be helped by stimulated batting and ducking practice with a tennis ball.
- The un-sportsmanlike practice of crowding the plate or jumping around to rattle the pitcher must not be tolerated. This could endanger the batter if it causes the pitcher to lose control. Umpires should stop such actions.



- Painful finger and hand injuries can be reduced by making sure the batter holds the bat correctly when bunting. Youngsters have a tendency to lean too far over the plate and not keep the ball well out toward the end of the bat. This should be corrected.
- When the batter becomes a base runner, that player should be taught to run outside the foul lines when going from home plate to first and from third to home, to reduce the chance of being hit by a thrown ball.

Safe Handling of Bats

- A review of the batter's potential for causing injuries to others points up the following: The most easily prevented type of accident is the too frequent fault of beginners throwing the bat while running to first base. This unthinking act may be corrected through individual instruction to drop the bat safely by:
 - ~ *Having the player drop the bat in a marked-off circle near where running starts.*
 - ~ *Counting the player "out" in practice whenever the player fails to drop the bat correctly.*
 - ~ *Providing bats with grips that are not slippery.*

Proper fielding of balls

- Misjudging the flight of a batted ball may be corrected by drilling with flies which begin easy and made more difficult as a player's judgment and skill improves. Everyone should eventually be able to handle balls that go overhead.
- In addition to a player never losing sight of a ball from the time it leaves the bat, the player should keep the glove positioned and the body relaxed for a last split-second move.
- An infielder can best be protected by an aggressive short-hop fielding play by always keeping the "nose pointed at the ball" and the eyes glued on it. Also, if moving forward, the player is in a better position to make a throw.
- It is safer for the player to knock a ball down and handle it then to let the ball determine the play.



2) Pre-game

- Before each game the Managers and Umpires should walk the field to check for safety issues. Notify the Safety Officer immediately if the field is unsafe for playing.
- Managers should meet with Umpires to review ground rules.
- Ensure that all bats and equipment are secured inside the dugouts.
- Inspect all equipment for defects.

3) During the Game

- Make sure that players carry all gloves and other equipment off the field and to the dugout when their team is up at bat. No equipment shall be left lying on the field, either in fair or foul territory.
- Keep players alert.
- Maintain discipline and professionalism at all times.
- Be organized.
- Keep players and substitutes sitting on the team's bench or in the dugout unless participating in the game or preparing to enter the game.
- Keep track of pitch count for your team as well as your opponent.
- Make sure catchers are wearing the proper equipment.
- Encourage everyone to think Safety First.
- Observe the "no on-deck" rule for batters and keep players behind the screens at all times. No player should handle a bat in the dugouts at any time.
- Keep players off fences.
- Get players to drink often so they do not dehydrate.
- Do not play children that are ill or injured.
- Attend to children that become injured in a game.
- Do not lose focus by engaging in conversation with parents.



4) End of Game

- Inspect the field for any damage that may have occurred. Notify the Safety officer immediately if damage has occurred.
- Pick up all debris and trash on the field, in the dugouts and around the field.
- Make sure that every child gets back to a parent. No child is to be left alone.
- Forward pitch count forms to the division commissioner by email or text.

**FORWARD ALL WINS AND LOSSES (if necessary) TO DIVISION
COMMISSIONER VIA EMAIL OR TEXT.**



FIRST AID BASICS

BASIC CONCEPTS

- Never assume the role of a physician.
- Whenever there is any doubt, refer to a physician.
- Always remain calm.
- Never move a player who has a potentially serious injury (head, neck, back). This includes sitting up.
- Use good judgment by stopping to think.
- Get to a phone and call parents and an ambulance, if necessary. (911)
- STOP playing the game when a serious injury occurs.
- An excellent review entitled “Prevention and Emergency Management of Youth Baseball and Softball Injuries” prepared by The American Orthopedic Society for Sports Medicine (AOSSM) can be found at:

<https://www.sportsmed.org/aossmimis/members/downloads/YouthBaseballandSoftballInjuries.pdf>



COMMON INJURIES AND IMMEDIATE FIRST-AID PROCEDURES

HEAD INJURY without loss of consciousness

No return to play that day if any symptoms (transient confusion, inattention, disorientation, amnesia, visual changes, vomiting, dizziness, delayed verbal and motor responses, slurred speech, in coordination, emotions out of proportion to circumstance). Follow up with their doctor by phone that day for further instructions and return to play recommendations.

NECK OR BACK INJURY

If the pain is severe, and especially if there is numbness or tingling or weakness in the arms or legs, do not attempt to move or sit the player up. Keep the injured player calm. Send for an ambulance. If the pain is slight, can apply cold to the area.

HEAT ILLNESS

There is a spectrum of heat illness ranging from post exercise muscle cramps to severe heat stroke. Young athletes can manifest any of the heat related illnesses. Heat exhaustion precedes heat stroke and is caused by water and/or salt depletion. Athletes will feel sick, weak; possibly have a headache and also vomiting. They should stop their activity, rest in cooler shade, and be given fluids, preferably salt containing sport drinks. Any athlete who is very lethargic and ill appearing, warm and/ or unable to drink liquids should have emergency medical care called.

EYE INJURY

A doctor should see any injured eye. Do not touch or rub an injured eye. Do NOT remove objects stuck into the eye. Cover the injured eye with a paper cup until you can get medical help. An eye injury may require a tetanus booster.



MUSCLE CRAMPS

A muscle cramp is a contracted muscle that does not relax that causes sudden tight intense pain. This occurs most commonly at the back of the lower leg/calf (charley horse), the back of the thigh (hamstring), or the front of the thigh (quadriceps). A cramp can last a few seconds to 15 minutes or longer. Cause unknown. However, cramps are often related to poor conditioning, inadequate stretching, dehydration, and salt depletion. Gently stretch and massage the muscle. Hold in stretched position until the cramp stops. If the cramp is in the calf, push the foot against an immovable object until the pain is gone.

WIND KNOCKED OUT

This is a description of what happens when a blow to the mid upper abdomen (solar plexus) causes the diaphragm muscle to spasm and therefore one can't breathe. Inhaling and exhaling is dependent on the diaphragm. The spasm lasts seconds. Calm the child. Advise to try deep breathing.



The Legacy of Tommy John: Increasing Youth Baseball Injuries?

*Wiemi A Douoguih, M.D.
Medical Director MedStar Sports Medicine
Washington Region
Medical Director,*

In 1974 Tommy John was a power pitcher for the Los Angeles Dodgers. By the middle of the season he had raced out to a personal best 13-3 record and was considered by some to be a favorite for the CY Young award. On July 17th, 1974 John was on the mound facing the Montreal Expos. Tommy attempted to throw a sinker to Hal Breeden in the top of the fourth inning, but the pitch went into the stands. He attempted one more pitch and, although it reached the catcher's mitt, things didn't feel right. So, he stepped off the mound and headed for the dugout. Dr. Frank Jobe, Orthopaedic surgeon for the Los Angeles Dodgers, was sitting in the stands at the time Tommy threw the first pitch and knew something was seriously wrong. After Dr. Jobe watched John grab his elbow and walk off the mound he headed straight to the training room to meet him. Dr. Jobe performed a thorough physical exam and was convinced John had torn his ulnar collateral ligament. Prior to 1974 the diagnosis of a torn ulnar collateral ligament had never been made. Dr. Jobe who had lived through the final years of Sandy Koufax' career during which Koufax pitched with chronic elbow pain, was convinced that John had torn the ligament that we now know serves as the primary stabilizer of the thrower's elbow.

Dr. Jobe placed Tommy's arm in a cast and prescribed a six week period of rest. After coming out of the cast Tommy began a throwing program, but each time he reached 75% effort the elbow began to hurt and he had to stop throwing. At this point Dr. Jobe knew that nothing short of a miracle would allow Tommy to return to pitching. Dr. Jobe had been devising such a miracle over the previous several years. He just didn't know if it would work. He had long thought the ulnar collateral ligament of the elbow was the structure injured when a thrower "blew out his arm". However, there were no MRI's in 1974 to assist him with the diagnosis. He had been working on a procedure in the lab to reconstruct the injured ligament; but he'd never done it on a live human. When he proposed the experimental procedure to Tommy John he gave him a 1 in 100 chance of success! While these were ridiculous odds by



today's standards, in 1974 Tommy John knew he really didn't have any other options if he wanted to try to pitch again.

On September 25th, 1974 Dr. Jobe performed the first ever ulnar collateral ligament reconstruction on Tommy John. He transferred a tendon from John's forearm (called the palmaris longus tendon) and weaved it around the torn ligament three times before sewing it into the native ligament. 1 year and 1 day after the fateful surgery Tommy threw a live bullpen. He felt tentative and wondered if would ever pitch again at the major league level. However, with each passing month Tommy's arm grew stronger. In fact, he began to tell people that it felt stronger than ever had before the surgery. The following year he finished the season 10-10. Tommy's initial concerns and Dr. Jobe's ominous prediction turned out to be unfounded. Tommy went on to pitch 14 seasons, at the major league level. He recorded 164 more wins and made three World Series appearances. The procedure that was given a 1/100 chance of success now bears the name of the courageous pitcher who took a chance on the brilliant, innovative head physician for the Los Angeles Dodgers.

Dr. Jobe passed away earlier this year, leaving behind him a legacy of reborn pitchers brought back from the proverbial dead. In fact, one-third of all major league pitchers in 2013 had undergone the "Tommy John" procedure. With success rates reported as high as 97.2% after Tommy John surgery, Dr. Jobe's groundbreaking surgery has revolutionized the way players, coaches and executives think about injury in baseball.⁵ Unfortunately, having found a miraculous cure for a problem that in the past meant the death knell of the overhead thrower may have created another problem altogether. The start of the millennium saw an increase in year round baseball, overlapping seasons and showcases. A reckless mentality began to permeate youth baseball.

In 2002, Lyman studied a cohort of youth baseball players over the course of a little league season.¹ Four hundred and seventy-six young (ages 9 to 14 years) baseball pitchers were followed for one season. They noted that half of the subjects experienced elbow or shoulder pain during the season. The curveball was associated with a 52% increased risk of shoulder pain and the slider was associated with an 86% increased risk of elbow pain. There was a significant association between the number of pitches thrown in a game and during the season and the rate of elbow pain and shoulder pain. As a result of their findings they recommended limiting volume of pitches and avoidance of curve ball and slider until after the age of fourteen. While shoulder and elbow pain were concerning in this young cohort the link between pain and surgery



had not yet been established. In 2004 Petty reported on a cohort of high school throwers undergoing UCL reconstruction surgery noting a 50% increase in the number of Tommy John surgeries over a ten year period.² While 74% were able to return to play, those undergoing UCL reconstruction averaged 3 major risk factors including: year-round throwing, seasonal overuse, event overuse, throwing velocity more than 80 mph, throwing breaking pitches before age 14, and inadequate warm-ups. In fact 67% reported throwing breaking pitches before the age of 14.

Mounting evidence lead the Medical Baseball Safety Advisory Committee in 2006 to make recommendations regarding pitch counts and types of pitches to be thrown for specific age groups, in an effort to reduce the injury incidence in youth baseball players. By the end of the decade it seemed that progress was being made in terms understanding of factors responsible for injury. But it's one thing to know the rules and another to enforce them. In 2012 Fazarale conducted a survey of youth baseball coaches to assess their understanding and implementation of the Medical Baseball Safety Advisory Committee's recommendations for youth pitchers.⁷

The findings were alarming. Coaches correctly answered only 43% of questions regarding pitch count and rest periods. 73% reported that they followed the recommendations, while only 53% felt that other coaches in the league abided by the recommendations. 35% percent of coaches stated that their pitchers reported shoulder or elbow pain during the season, and 19% reported that one of their pitchers pitched a game with a sore or fatigued arm during the season. Interestingly, no coaches reported any pitching-related injuries among their players requiring surgery. Yang, in March of 2014 reported on the results of a nationwide survey of 754 youth pitchers.⁸ 43.4% of all pitchers reported that they pitched on consecutive days, 30.7% pitched on multiple teams with overlapping seasons, and 19.0% pitched multiple games a day during the 12 months before the study. Each of these factors statistically increased the risk of throwing arm pain. 70% of pitchers threw off-speed pitches which was also associated with a statistically higher incidence of arm pain. Pitching with arm pain or fatigue resulted in a nearly 8 fold increase in injury to the throwing arm.

Nearly 40 years have passed since Tommy John under went fateful surgery to reconstruct the ligament in his elbow. Tommy John's 14 years in the league after surgery seems to be an anomaly, as one recent study showed that the average return to play after UCL reconstructive surgery was only 3.5 years.⁹ Although much has been learned about baseball injuries during this



time, it's critical that the lessons learned be applied in a way that will help young players achieve their goals while staying out of the doctor's office.

At MedStar Sports Medicine we are adamant that young players follow the guidelines set forth by the Medical Baseball Safety Advisory Committee for pitch counts, proper rest and avoidance of modifiable risk factors. In general, we recommend a four month rest from throwing each year. Young players should avoid pitching back to back games, pitching multiple games on the same day and playing in overlapping seasons. Pitching sliders and curve balls should be avoided until after the age of 14. Players should also avoid playing pitcher and catcher. Finally, we encourage players to play other sports so that their bodies will develop other muscle groups that may aid in preventing baseball injuries. Following these guidelines does not guarantee that a player will not get injured.

But these recommendations are supported by a growing body of evidence that too much throwing can be harmful.

While our surgeons have had tremendous success returning elite youth and professional baseball players to the field of play, our focus is on prevention. Our approach to the overhead thrower includes performing cutting edge research, educational seminars tailored to coaches and parents, and throwers' screening programs.

Further information can be found on our website: medstarsportshealth.org. More information on pitch counts and injury prevention can be found at the ASMI website⁴.

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FACILITY AND FIELD INSPECTION LIST

Facility/Field Name: _____

Inspected By: _____

Date _____ Time _____

- Holes, damage, rough or uneven spots
- Slippery Areas, long grass
- Glass, rocks and other debris & foreign objects
- Damage to screens, fences edges or sharp fencing
- Unsafe conditions around backstop, pitchers mound
- Warning Track condition
- Dugouts condition before and after games
- Make sure telephones are available
- Area's around Bleachers free of debris
- General Garbage clean-up
- Who's in charge of removing debris? _____.
- Conditions of restrooms and restroom supplies
- Concession Stand inspection

NOTES/ HAZARDS

Managers, coaches and umpires are responsible for checking field safety conditions before each game. Safety hazards that may put players at risk must be noted and games will be postponed if there is a genuine safety concern.



ANNUAL FACILITY/FIELD SURVEY

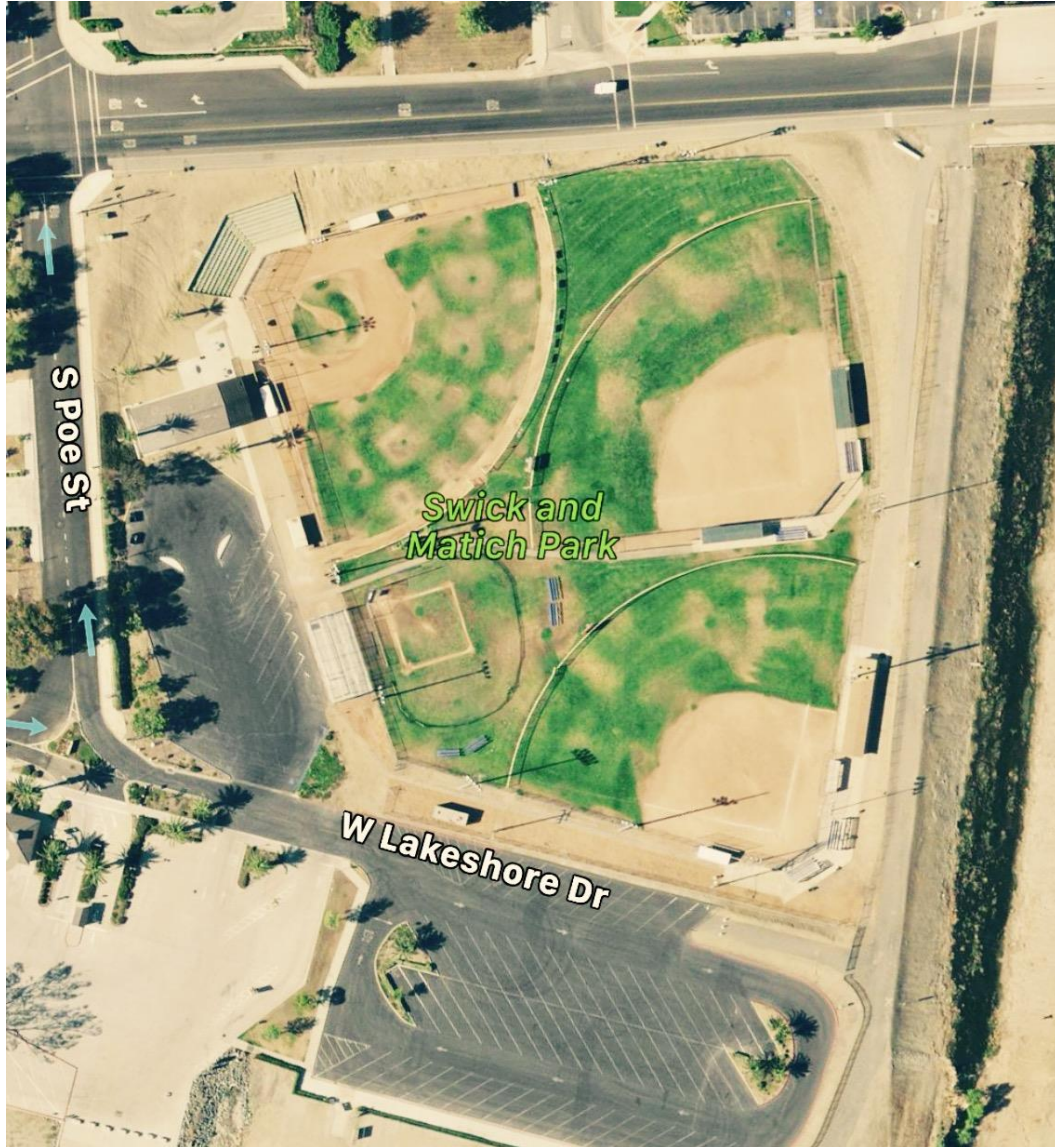
Lake Elsinore Little League will conduct an annual survey of all facilities in accordance with Little League requirements. The purpose of this survey is to find and correct any concerns with fields, dugouts, bleachers, snack bars and other facilities. This survey will be conducted by the Lake Elsinore Little League President, the Field Maintenance Officer and Safety Director. The completed facility survey will be on file with Lake Elsinore Little League and submitted to Little League International.

(Please See Attachments)





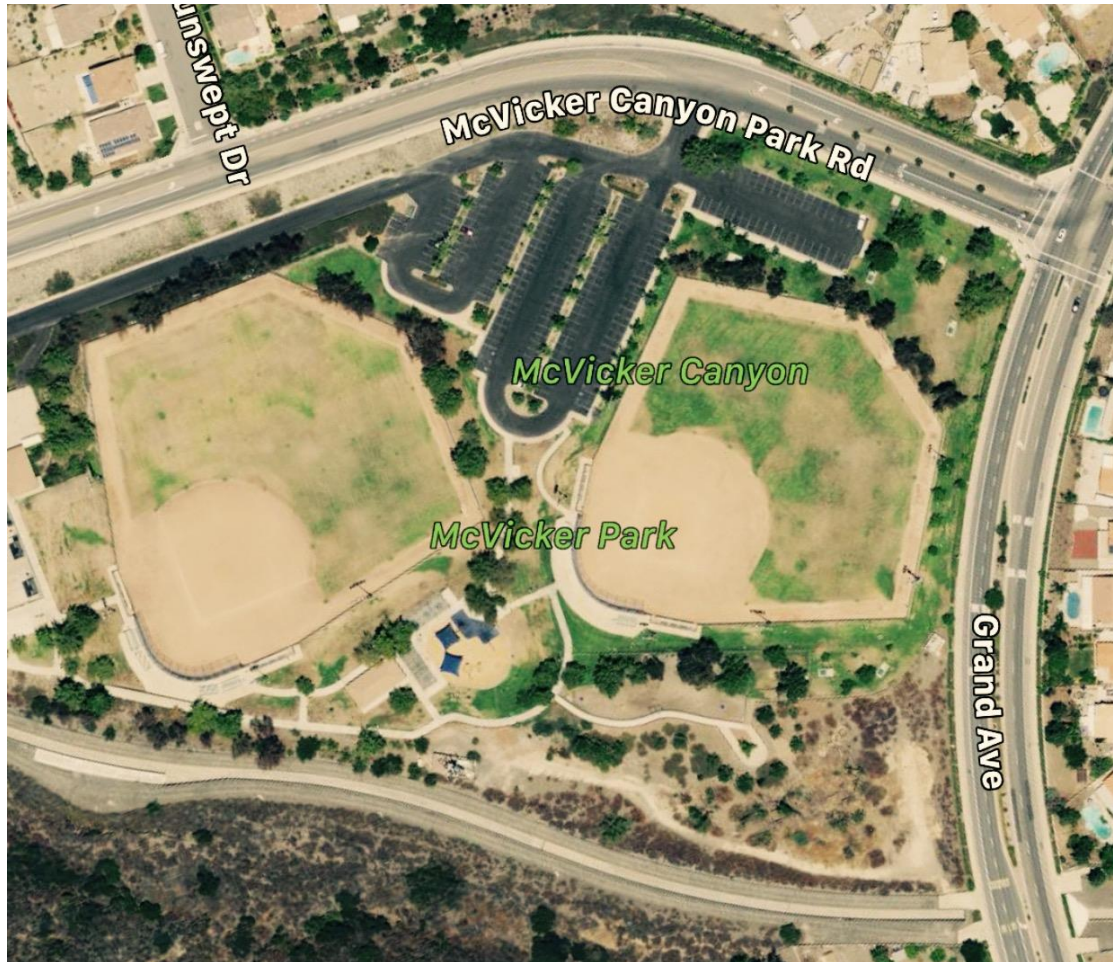
Swick-Match Park



Swick-Match Park
301-399 W Lakeshore Dr.
Lake Elsinore, CA 92530



McVicker Canyon Park



McVicker Park
29355 Grand Ave.
Lake Elsinore, CA 92530



Rosetta Canyon Park



Rosetta Canyon Park
39423 Ardenwood Way
Lake Elsinore, CA. 92532



EVACUATION PLAN

Severe storms, lightning, earthquakes and fire are all possible in Southern California. For this reason, Lake Elsinore Little League must have an evacuation plan. If an emergency should arise that would require evacuation:

- 1. At that time, all players will return to the dugout and wait for their parents to come and get them.*
- 2. If a players' parent is not attending the game, the Manager will take responsibility for evacuating that child.*
- 3. Once parents have obtained their children, they will proceed to their cars in a calm and orderly manner.*
- 4. Drivers will then proceed slowly and cautiously out of the facility, observing the 5 MPH speed limit.*
- 5. Once outside the facility, drivers will observe the posted speed limits.*



TEN COMMANDMENTS OF SAFETY

TEN COMMANDMENTS OF SAFETY

- 
- I. BE ALERT!
 - II. CHECK PLAYING FIELD FOR SAFETY HAZARDS
 - III. WEAR PROPER EQUIPMENT
 - IV. ENSURE EQUIPMENT IS IN GOOD SHAPE
 - V. ENSURE FIRST AID IS AVAILABLE
 - VI. MAINTAIN CONTROL OF THE SITUATION
 - VII. MAINTAIN DISCIPLINE
 - VIII. SAFETY IS A TEAM SPORT
 - IX. BE ORGANIZED
 - X. HAVE FUN!
- 



SNACK BAR & FOOD SAFETY

- No person under the age of 16 will be allowed behind the counter in the concession stand.
- Volunteers working in the concession stands will be trained in safe food preparation. (Safe food handling procedures are posted at the Snack Bar.)
- Employees/Volunteers will wash hands with soap before their shift and frequently thereafter.
- All food materials will be handled in a sanitary manner and gloves will be used to handle food materials which are not wrapped
- Training will cover safe use of the equipment.
- Cooking equipment will be inspected periodically and repaired or replaced if need be.
- Food that is not purchased by Lake Elsinore Little League to sell within the snack bar will not be cooked, prepared, or sold.
- Cooking grease will be stored safely in containers away from open flames.
- Cleaning chemicals must be stored in a locked container.
- A certified Fire Extinguisher suitable for grease fires must be placed in plain sight at all times.
- All concession stand workers are to be instructed on the use of fire extinguishers.
- A fully stocked First Aid Kit will be placed in the Concession stand.
- The barbecue will be cleaned thoroughly prior to cooking. Hamburgers, chicken breasts, hotdogs and sausages should be cooked thoroughly so that there is no uncooked meat.
- Food items such as meats, condiments, onions, cheese, etc. shall be kept out of the direct sun.
- Prior to closing the Snack Bar, any food that has been heated such as nacho cheese, hamburgers, etc. will be thrown away.



Concession Stand Tips

SAFETY FIRST

Requirement 9

12 Steps to Safe and Sanitary Food Service Events: The following information is intended to help you run a healthful concession stand. Following these simple guidelines will help minimize the risk of foodborne illness. This information was provided by District Administrator George Glick, and is excerpted from "Food Safety Hints" by the Fort Wayne-Allen County, Ind., Department of Health.

1. Menu.

Keep your menu simple, and keep potentially hazardous foods (meats, eggs, dairy products, protein salads, cut fruits and vegetables, etc.) to a minimum. Avoid using precooked foods or leftovers. Use only foods from approved sources, avoiding foods that have been prepared at home. Complete control over your food, from source to service, is the key to safe, sanitary food service.

2. Cooking.

Use a food thermometer to check on cooking and holding temperatures of potentially hazardous foods. All potentially hazardous foods should be kept at 41° F or below (if cold) or 140° F or above (if hot). Ground beef and ground pork products should be cooked to an internal temperature of 155° F, poultry parts should be cooked to 165° F. Most foodborne illnesses from temporary events can be traced back to lapses in temperature control.

3. Reheating.

Rapidly reheat potentially hazardous foods to 165° F. Do not attempt to heat foods in crock pots, steam tables, over sterno units or other holding devices.

Slow-cooking mechanisms may activate bacteria and never reach killing temperatures.

4. Cooling and Cold Storage.

Foods that require refrigeration must be cooled to 41° F as quickly as possible and held at that temperature until ready to serve. To cool foods down quickly, use an ice water bath (60% ice to 40% water), stirring the product frequently, or place the food in shallow pans no more than 4 inches in depth and refrigerate. Pans should not be stored one atop the other and lids should be off or ajar until the food is completely cooled. Check temperature periodically to see if the food is cooling properly. Allowing hazardous foods to remain unrefrigerated for too long has been the number ONE cause of foodborne illness.

5. Hand Washing.

Frequent and thorough hand washing remains the first line of defense in preventing foodborne disease. The use of disposable gloves can provide an additional barrier to contamination, but they are no substitute for hand washing!

6. Health and Hygiene.

Only healthy workers should prepare and serve food. Anyone who shows symptoms of disease (cramps, nausea, fever, vomiting, diarrhea, jaundice, etc.) or who has open sores or infected cuts on the hands should not be allowed in the food concession area. Workers should wear clean outer garments and should not smoke in the concession area. The use of hair restraints is recommended to prevent hair ending up in food products.

7. Food Handling.

Avoid hand contact with raw, ready-to-eat foods and food contact surfaces. Use an acceptable dispensing utensil

to serve food. Touching food with bare hands can transfer germs to food.

8. Dishwashing.

Use disposable utensils for food service. Keep your hands away from food contact surfaces, and never reuse disposable dishware. Wash in a four-step process:

1. Washing in hot soapy water;
2. Rinsing in clean water;
3. Chemical or heat sanitizing; and
4. Air drying.

9. Ice.

Ice used to cool cans/bottles should not be used in cup beverages and should be stored separately. Use a scoop to dispense ice; never use the hands. Ice can become contaminated with bacteria and viruses and cause foodborne illness.

10. Wiping Cloths.

Rinse and store your wiping cloths in a bucket of sanitizer (example: 1 gallon of water and 1/2 teaspoon of chlorine bleach). Change the solution every two hours. Well sanitized work surfaces prevent cross-contamination and discourage flies.

11. Insect Control and Waste.

Keep foods covered to protect them from insects. Store pesticides away from foods. Place garbage and paper wastes in a refuse container with a tight-fitting lid. Dispose of wastewater in an approved method (do not dump it outside). All water used should be potable water from an approved source.

12. Food Storage and Cleanliness.

Keep foods stored off the floor at least six inches. After your event is finished, clean the concession area and discard unusable food.

13. Set a Minimum Worker Age.

Leagues should set a minimum age for workers or to be in the stand; in many states this is 16 or 18, due to potential hazards with various equipment.

Safety plans must be postmarked no later than May 1st.



Volunteers Must Wash Hands

HOW



WHEN

Wash your hands before you prepare food or as often as needed.

Wash after you:

- ▶ use the toilet
- ▶ touch uncooked meat, poultry, fish or eggs or other potentially hazardous foods
- ▶ interrupt working with food (such as answering the phone, opening a door or drawer)
- ▶ eat, smoke or chew gum
- ▶ touch soiled plates, utensils or equipment
- ▶ take out trash
- ▶ touch your nose, mouth, or any part of your body
- ▶ sneeze or cough

Do not touch ready-to-eat foods with your bare hands.

Use gloves, tongs, deli tissue or other serving utensils.
Remove all jewelry, nail polish or false nails unless you wear gloves.

Wear gloves.

when you have a cut or sore on your hand
when you can't remove your jewelry

If you wear gloves:

- ▶ wash your hands before you put on new gloves

Change them:

- ▶ as often as you wash your hands
- ▶ when they are torn or soiled

Developed by UMass Extension Nutrition Education Program with support from U.S. Food & Drug Administration in cooperation with the MA Partnership for Food Safety Education, United States Department of Agriculture Cooperating. UMass Extension provides equal opportunity in programs and employment.





Thermy^o says:

"It's Safe to Bite
When The Temperature is Right!"

Food Safety and Inspection Service, USDA



THE HEIMLICH MANEUVER

The Heimlich maneuver is an emergency method of removing food or foreign objects from the airway to prevent suffocation. When approaching a choking person, one who is still conscious, ask, "Can you cough? Can you speak?" If the person can speak or cough, do not perform the Heimlich maneuver or pat them on the back. Encourage them to cough.

To Perform the Heimlich Maneuver

- Grasp the choking person from behind.
- Place a fist, thumb side in, just below the person's breastbone (sternum), but above the naval.
- Wrap second hand firmly over this fist; and
- Pull the fist firmly and abruptly into the top of the stomach.
- It is important to keep the fist below the chest bones and above the naval (belly button).

The procedure should be repeated until the airway is free from obstruction or until the person who is choking loses consciousness (goes limp). These will be violent thrusts, as many times as it takes.

Heimlich Maneuver For A Child

- Place your hands at the top of the pelvis.
- Put the thumb of your hand at the pelvis line.
- Put the other hand on top of the first hand; and
- Pull forcefully back as many times as needed to get object out or the child becomes limp.

Most individuals are fine after the object is removed from the airway. However, occasionally the object will go into one of the lungs. If there is a possibility that the foreign object was not expelled, medical care should be sought.

If the object cannot be removed completely by performing the Heimlich maneuver, immediate medical care should be sought by calling 911 or by going to the local emergency room.



Asthma Emergency Signs

Seek Emergency Care If A Child Experiences Any Of The Following:

- + Child's wheezing or coughing does not improve after taking medicine (15-20 minutes for most asthma medications)
- + Child's chest or neck is pulling in while struggling to breathe
- + Child has trouble walking or talking
- + Child stops playing and cannot start again
- + Child's fingernails and/or lips turn blue or gray
- + Skin between child's ribs sucks in when breathing

Asthma is different for every person.

The "Asthma Emergency Signs" above represent general emergency situations as per the National Asthma Education and Prevention Program 1997 Expert Panel Report.

If you are at all uncertain of what to do in case of a breathing emergency...

Call 9-1-1 and the child's parent/guardian!

Michigan Asthma Steering Committee of the Michigan Department of Community Health

(From the Grandville, Mich., Little League 2001 Safety Plan)



COMMUNICABLE DISEASE PROCEDURES

While risk of one athlete infecting another with HIV/AIDS during competition is close to non-existent, there is a remote risk that other blood borne infectious diseases can be transmitted. For example, Hepatitis B can be present in blood as well as in other body fluids. Procedures for reducing the potential for transmission of these infectious agents should include, but not be limited to the following:

- The bleeding must be stopped, the open wound covered and, if there is an excessive amount of blood on the uniform, it must be changed before the athlete may participate.
- Routine use of gloves or other precautions to prevent skin and mucous-membrane exposure when contact with blood or other body fluids is anticipated.
- Immediately wash hands and other skin surfaces if contaminated (i.e., in contact) with blood or other body fluids. Wash hands immediately after removing gloves.
- Clean all contaminated surfaces and equipment with an appropriate disinfectant before competition resumes.
- Practice proper disposal procedures to prevent injuries caused by needles, scalpels, and other sharp instruments or devices.
- Although saliva has not been implicated in HIV transmission, to minimize the need for emergency mouth-to-mouth resuscitation, mouthpieces, resuscitation bags, or other ventilation devices should be available for use.
- Athletic trainers or coaches with bleeding or oozing skin conditions should refrain from all direct athletic care until the condition is resolved.
- Contaminated towels should be properly disposed of or disinfected.
- Follow acceptable guidelines in the immediate control of bleeding and when handling bloody dressings, mouth guards and other articles containing body fluids.



FIRST AID KITS & SAFETY EQUIPMENT

First Aid Kit

First Aid kits are given to each manager per team and are maintained on a weekly basis.

- Bandages — sheer and flexible
- Non-stick pads — assorted sizes
- Soft-Gauze bandages
- Oval eye pads
- Triangular bandage
- Hypo-allergenic first aid tape dispenser
- 2-inch elastic bandage
- Antiseptic wipes
- First aid cream
- Instant cold pack
- Tylenol® extra-strength caplets
- Scissors
- Tweezers
- First aid guide, Contents card and Disposable glove

Additional first aid supplies are also available at the Snack Bar.



Batting / Fielding Chest Protectors

Lake Elsinore Little League owns a few safety vests that contain chest plates for those children who wish to use them. These safety vests are located in the storage bin next to Match field and can be placed over the player's uniform. They are designed to protect against injury to a player's heart as a result of being struck in the chest by a pitched or batted ball. If a player desires to use this device, proper care should be exercised in making sure that it fits properly and the device should be returned to the storage shed immediately after use so that other players may use it.



**WHEN IT'S HOT,
DRINK BEFORE
YOU'RE THIRSTY.**

Drinking Guidelines For Hot Day Activities

Before: Drink 8 oz. immediately before exercise

During: Drink at least 4 oz. every 20 minutes

After: Drink 16 oz. for every pound of weight lost

Dehydration signs: Fatigue, flushed skin, light-headed

What to do: Stop exercising, get out of sun, drink

Severe signs: Muscle spasms, dizziness, delirium



IN CASE OF MEDICAL EMERGENCY

EMERGENCY PROCEDURES

In case of emergency take the following steps:

- Give first aid and have someone call 911 immediately if an ambulance is necessary. The address to provide is:

Swick-Matich Park
301-399 W Lakeshore Dr.
Lake Elsinore, CA 92530

McVicker Park
29355 Grand Ave.
Lake Elsinore, CA 92530

Rosetta Canyon Park
39423 Ardenwood Way
Lake Elsinore, CA. 92532

- Notify parents immediately if they are not on the scene.
- Fill out a Lake Elsinore Little League Injury Report form (See Attachment).
- Talk the team about the event and why the situation occurred and how it might have been prevented.



REPORTING AN ACCIDENT

ACCIDENT REPORTS

Please report all accidents and injuries as follows:

- Notify league Safety Officer by phone or email or in person within 24 hours (safety@lakeelsinorelittleleague.com).
- Fill out a Little League Baseball and Softball Accident Notification Form (See attachment.)
- Deliver the accident report to the Safety Officer within 24 hours.
- Talk with anyone else in Lake Elsinore Little League (President, Vice-President, or your own division, etc.) about the incident. Lake Elsinore Little League insurance is supplemental to parents' own insurance policy. Claims must be filed with the League Safety Officer.

WHAT SHOULD BE REPORTED

An incident that causes any player, manager, coach, umpire, or volunteer to receive medical treatment and / or first aid must be reported to the Safety Officer. This includes even passive treatments such as evaluation and diagnosis as to the extent of an injury, application of an ice pack, or the need for extra periods of rest. Near Misses should also be reported

WHEN REPORTS SHOULD BE MADE

All such incidents described above must be reported to the Safety Officer within 24 hours of the incident.



HOW TO REPORT ACCIDENTS

All accident reports are to be reported on the “injury reporting form”.
(Please see attachment)

Accident Reports need to be completed for any injury requiring first aid. It is through the compilation of the data in these reports that the league at both the local and the national levels can develop safety policies.

Accident report forms can be obtained on the websites of Lake Elsinore Little League and Little League Inc. They are also available in the Snack Bars on both Match and McVicker Fields.

REMEMBER:

Safety is everyone's job. Prevention is the key to reducing accidents to a minimum. Report all hazardous conditions to the Lake Elsinore Little League Safety Officer or any board member immediately. Do not play on a field that is unsafe or use unsafe playing equipment.

Be sure your players are fully equipped at all times, especially catchers and batters. Check you team's equipment often!



WHAT PARENTS SHOULD KNOW

It is suggested this memo should be reproduced on your league's letterhead over the signature of your president or safety officer and distributed to the parents of all participants at registration time.

WARNING: Protective equipment cannot prevent all injuries a player might receive while participating in Baseball / Softball.

WHAT PARENTS SHOULD KNOW ABOUT LITTLE LEAGUE® INSURANCE

The Little League Insurance Program is designed to afford protection to all participants at the most economical cost to the local league. The Little League Player Accident Policy is an excess coverage, accident only plan, to be used as a supplement to other insurance carried under a family policy or insurance provided by an employer. If there is no primary coverage, Little League insurance will provide benefits for eligible charges, up to Usual and Customary allowances for your area. A \$50 deductible applies for all claims, up to the maximum stated benefits.

This plan makes it possible to offer exceptional, affordable protection with assurance to parents that adequate coverage is in force for all chartered and insured Little League approved programs and events.

If your child sustains a covered injury while taking part in a scheduled Little League Baseball or Softball game or practice, here is how the insurance works:

1. The Little League Baseball and Softball accident notification form must be completed by parents (if the claimant is under 19 years of age) and a league official and forwarded directly to Little League Headquarters within 20 days after the accident. A photocopy of the form should be made and kept by the parent/claimant. Initial medical/dental treatment must be rendered within 30 days of the Little League accident.
2. Itemized bills, including description of service, date of service, procedure and diagnosis codes for medical services/ supplies and/or other documentation related to a claim for benefits are to be provided within 90 days after the accident. In no event shall such proof be furnished later than 12 months from the date the initial medical expense was incurred.
3. When other insurance is present, parents or claimant must forward copies of the Explanation of Benefits or Notice/ Letter of Denial for each charge directly to Little League International, even if the charges do not exceed the deductible of the primary insurance program.
4. Policy provides benefits for eligible medical expenses incurred within 52 weeks of the accident, subject to Excess Coverage and Exclusion provisions of the plan.
5. Limited deferred medical/dental benefits may be available for necessary treatment after the 52-week time limit when:
 - (a) Deferred medical benefits apply when necessary treatment requiring the removal of a pin /plate, applied to transfix a bone in the year of injury, or scar tissue removal, after the 52-week time limit is required. The Company will pay the Reasonable Expense incurred, subject to the Policy's maximum limit of \$100,000 for any one injury to any one Insured. However, in no event will any benefit be paid under this provision for any expenses incurred more than 24 months from the date the injury was sustained.
 - (b) If the Insured incurs Injury, to sound, natural teeth and Necessary Treatment requires treatment for that Injury be postponed to a date more than 52 weeks after the injury due to, but not limited to, the physiological changes of a growing child, the Company will pay the lesser of: 1. A maximum of \$1,500 or 2. Reasonable Expenses incurred for the deferred dental treatment.
Reasonable Expenses incurred for deferred dental treatment are only covered if they are incurred on or before the Insured's 23rd birthday. Reasonable Expenses incurred for deferred root canal therapy are only covered if they are incurred within 104 weeks after the date the Injury occurs.
No payment will be made for deferred treatment unless the Physician submits written certification, within 52 weeks after the accident, that the treatment must be postponed for the above stated reasons.
Benefits are payable subject to the Excess Coverage and the Exclusions provisions of the Policy.

We hope this brief summary has been helpful in providing a better understanding of the operation of the Little League insurance program.



ESPAÑOL – LO QUE LOS PADRES DEBEN SABER

Se sugiere que este memo se reproduzca en el papel membretado de su liga con la firma de su presidente u oficial de seguridad y se distribuya a los padres de todos los participantes en el momento del registro.

PRECAUCIÓN: El equipo de protección no puede prevenir todas las lesiones que un jugador podría recibir al practicar Béisbol /Softbol.

LO QUE LOS PADRES DEBEN SABER ACERCA DEL SEGURO DE LAS PEQUEÑAS LIGAS

El Programa de Seguro de las Pequeñas Ligas está diseñado a producir protección a todos los participantes al costo más económico a la liga local. La Política de Accidentes del Jugador de las Pequeñas Ligas es un plan de cobertura extra solo para accidentes, para usar como suplemento para otros seguros llevados bajo las políticas de una familia o seguro proporcionado por el empleador del padre. Si no existe cobertura primaria, el seguro de las Pequeñas Ligas le proporcionará beneficios por cambios elegibles, hasta permisos Usuales y Acostumbrados para su área, después de un deducible de \$50.00 por reclamo, hasta el máximo de beneficios indicado.

Este plan hace posible ofrecer protección excepcional y alcanzable asegurando a los padres quienes su cobertura adecuada están en función para todos los eventos y programas aprobados por las Pequeñas Ligas asegurados.

Si su hijo tiene una lesión cubierta mientras forma parte de un juego o práctica programada de las Pequeñas Ligas de Béisbol o Softbol, así es como funciona el seguro:

1. Se debe completar el formulario de notificación de accidente de las Pequeñas Ligas de Béisbol por los padres (si el demandante es menor de 19 años) y un oficial de la liga y dirigido directamente a la Sede de las Pequeñas Ligas dentro de 20 días después del accidente. Se debe sacar una copia del formulario y lo debe mantener el padre/demandante. Se debe iniciar el tratamiento médico/dental dentro de 30 días del accidente de la Pequeña Liga.
2. Facturas detalladas, incluyendo la descripción del servicio, fecha del servicio, procedimiento y códigos de diagnósticos para servicios/provisiones médicas y/u otra documentación relacionada a un reclamo por beneficios deben proporcionarse dentro de 90 días después del accidente. De ninguna manera tal prueba debe proporcionarse después de 12 meses a partir de la fecha inicial en que incurrió el gasto médico.
3. Cuando está presente otro seguro, los padres o el demandante debe dirigir copias de la Explicación de Beneficios o Notificación/Carta de Negación de cada cargo directamente a la Sede de las Pequeñas Ligas, aún si los cargos no exceden el deducible del programa de seguro principal.
4. La política proporciona beneficios para gastos médicos elegibles incurridos dentro de 52 semanas del accidente, sujetos a provisiones de Cobertura Excesiva y Exclusión del plan.
5. Beneficios médicos/dentales limitados diferidos pueden estar disponibles para tratamiento necesario después del límite de 52 semanas cuando:
 - (a) Los beneficios médicos diferidos aplican cuando es necesario un tratamiento requerido para quitar un clavo/placa, aplicada para reconstruir un hueso al año de lesión, o para quitar una cicatriz, se requiere después del límite de 52 semanas. La Compañía pagará el Gasto Razonable incurrido, sujeto al límite máximo de \$100,000 de la Política para cualquier lesión a cualquier asegurado. Sin



embargo, en ningún caso se pagará a ningún beneficiario bajo esta provisión por cualquier gasto incurrido más de 24 meses desde la fecha en que ocurrió la lesión.

(b) Si el asegurado incurre una lesión, a los dientes naturales sanos y requiere un Tratamiento Necesario para esa lesión y se pospone a una fecha mayor a 52 semanas después de la lesión debido a, pero no limitado a, los cambios fisiológicos de un niño en crecimiento, la Compañía pagará al menos: 1. Un máximo de \$1.500 o 2. Gastos razonables incurridos por el tratamiento dental diferido. Gastos Razonables incurridos por el tratamiento dental diferido solo se cubren si se incurren durante o antes el 23avo cumpleaños del asegurado. Gastos Razonables incurridos por terapia de tratamiento de endodoncia diferido solo se cubren si se incurren dentro de 104 semanas después que ocurrió la lesión.

No se hará ningún pago por tratamiento diferido a menos que el Médico entregue un certificado escrito, dentro de 52 semanas después del accidente, que el tratamiento se debe posponer por las razones antes declaradas.

Los beneficios se pueden pagar sujetos a la Cobertura Excesiva y las provisiones de Exclusiones de la Política.

Esperamos que este resumen escrito haya sido de ayuda para el mejor entendimiento de un importante aspecto de la operación del programa de seguro aprobado de las Pequeñas Ligas.



Sport Parent Code of Conduct

We, the _____ Little League, have implemented the following Sport Parent Code of Conduct for the important message it holds about the proper role of parents in supporting their child in sports. Parents should read, understand and sign this form prior to their children participating in our league.

Any parent guilty of improper conduct at any game or practice will be asked to leave the sports facility and be suspended from the following game. Repeat violations may cause a multiple game suspension, or the season forfeiture of the privilege of attending all games.

Preamble

The essential elements of character-building and ethics in sports are embodied in the concept of sportsmanship and six core principles:

- Trustworthiness,
- Respect,
- Responsibility,
- Fairness,
- Caring, and
- Good Citizenship.

The highest potential of sports is achieved when competition reflects these "six pillars of character."

I therefore agree:

1. I will not force my child to participate in sports.
2. I will remember that children participate to have fun and that the game is for youth, not adults.
3. I will inform the coach of any physical disability or ailment that may affect the safety of my child or the safety of others.
4. I will learn the rules of the game and the policies of the league.
5. I (and my guests) will be a positive role model for my child and encourage sportsmanship by showing respect and courtesy, and by demonstrating positive support for all players, coaches, officials and spectators at every game, practice or other sporting event.
6. I (and my guests) will not engage in any kind of unsportsmanlike conduct with any official, coach, player, or parent such as booing and taunting; refusing to shake hands; or using profane language or gestures.

7. I will not encourage any behaviors or practices that would endanger the health and well being of the athletes.
8. I will teach my child to play by the rules and to resolve conflicts without resorting to hostility or violence.
9. I will demand that my child treat other players, coaches, officials and spectators with respect regardless of race, creed, color, sex or ability.
10. I will teach my child that doing one's best is more important than winning, so that my child will never feel defeated by the outcome of a game or his/her performance.
11. I will praise my child for competing fairly and trying hard, and make my child feel like a winner every time.
12. I will never ridicule or yell at my child or other participants for making a mistake or losing a competition.
13. I will emphasize skill development and practices and how they benefit my child over winning. I will also de-emphasize games and competition in the lower age groups.
14. I will promote the emotional and physical well-being of the athletes ahead of any personal desire I may have for my child to win.
15. I will respect the officials and their authority during games and will never question, discuss, or confront coaches at the game field, and will take time to speak with coaches at an agreed upon time and place.
16. I will demand a sports environment for my child that is free from drugs, tobacco, and alcohol and I will refrain from their use at all sports events.
17. I will refrain from coaching my child or other players during games and practices, unless I am one of the official coaches of the team.

Parent/Guardian Signature



SAFETY MANUAL ATTACHMENTS

THE FOLLOWING SAFETY ITEMS ARE ATTACHED

- AIG Injury/Accident Report Form.
- Claim Form Instructions.
- Treatment of Dental Injuries
- Incident/Injury Report Form.
- Volunteer Application Form – 2021.
- Returning Volunteer Application Form – 2021.
- Little League Medical Release Form.
- Acknowledgement of Receipt and Review of the League Safety Manual & First Aid Kit.
- Lake Elsinore Little League Safety Code Certification Form.
- Lake Elsinore Little League Codes of Conduct.
 - Team Roster
 - Parents & Spectators
 - Players
 - Managers & Coaches
- Suggested Warm Up Drills
- Keep It Clean
- Hey Coach – Safety Suggestions



**LITTLE LEAGUE® BASEBALL AND SOFTBALL
ACCIDENT NOTIFICATION FORM
INSTRUCTIONS**



Send Completed Form To:
Little League, International
539 US Route 15 Hwy, PO Box 3485
Williamsport PA 17701-0485
Accident Claim Contact Numbers:
Phone: 570-327-1674 Fax: 570-326-9280

Accident & Health (U.S.)

- This form must be completed by parents (if claimant is under 19 years of age) and a league official and forwarded to Little League Headquarters within 20 days after the accident. A photocopy of this form should be made and kept by the claimant/parent. Initial medical/dental treatment must be rendered within 30 days of the Little League accident.
- Itemized bills including description of service, date of service, procedure and diagnosis codes for medical services/supplies and/or other documentation related to claim for benefits are to be provided within 90 days after the accident date. In no event shall such proof be furnished later than 12 months from the date the medical expense was incurred.
- When other insurance is present, parents or claimant must forward copies of the Explanation of Benefits or Notice/Letter of Denial for each charge directly to Little League Headquarters, even if the charges do not exceed the deductible of the primary insurance program.
- Policy provides benefits for eligible medical expenses incurred within 52 weeks of the accident, subject to Excess Coverage and Exclusion provisions of the plan.
- Limited** deferred medical/dental benefits may be available for necessary treatment incurred after 52 weeks. Refer to insurance brochure provided to the league president, or contact Little League Headquarters within the year of injury.
- Accident Claim Form must be fully completed - including Social Security Number (SSN) - for processing.

League Name			League I.D.			
Name of Injured Person/Claimant		SSN	PART 1	Date of Birth (MM/DD/YY)	Age	Sex <input type="checkbox"/> Female <input type="checkbox"/> Male
Name of Parent/Guardian, if Claimant is a Minor			Home Phone (Inc. Area Code)		Bus. Phone (Inc. Area Code)	
Address of Claimant			Address of Parent/Guardian, if different			

The Little League Master Accident Policy provides benefits in **excess** of benefits from other insurance programs subject to a \$50 deductible per injury. "Other insurance programs" include family's personal insurance, student insurance through a school or insurance through an employer for employees and family members. Please CHECK the appropriate boxes below. If YES, follow instruction 3 above.

Does the insured Person/Parent/Guardian have any insurance through:

Employer Plan	<input type="checkbox"/> Yes <input type="checkbox"/> No	School Plan	<input type="checkbox"/> Yes <input type="checkbox"/> No
Individual Plan	<input type="checkbox"/> Yes <input type="checkbox"/> No	Dental Plan	<input type="checkbox"/> Yes <input type="checkbox"/> No

Date of Accident	Time of Accident <input type="checkbox"/> AM <input type="checkbox"/> PM	Type of Injury
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Describe exactly how accident happened, including playing position at the time of accident:

Check all applicable responses in **each** column:

- | | | | | |
|---|---|---|---|--|
| <input type="checkbox"/> BASEBALL | <input type="checkbox"/> CHALLENGER (4-18) | <input type="checkbox"/> PLAYER | <input type="checkbox"/> TRYOUTS | <input type="checkbox"/> SPECIAL EVENT (NOT GAMES) |
| <input type="checkbox"/> SOFTBALL | <input type="checkbox"/> T-BALL (4-7) | <input type="checkbox"/> MANAGER, COACH | <input type="checkbox"/> PRACTICE | <input type="checkbox"/> PRACTICE |
| <input type="checkbox"/> CHALLENGER | <input type="checkbox"/> MINOR (6-12) | <input type="checkbox"/> VOLUNTEER UMPIRE | <input type="checkbox"/> SCHEDULED GAME | <input type="checkbox"/> SPECIAL GAME(S) |
| <input type="checkbox"/> TAD (2ND SEASON) | <input type="checkbox"/> LITTLE LEAGUE (9-12) | <input type="checkbox"/> PLAYER AGENT | <input type="checkbox"/> TRAVEL TO | (Submit a copy of your approval from Little League Incorporated) |
| | <input type="checkbox"/> INTERMEDIATE (50/70) (11-13) | <input type="checkbox"/> OFFICIAL SCOREKEEPER | <input type="checkbox"/> TRAVEL FROM | |
| | <input type="checkbox"/> JUNIOR (12-14) | <input type="checkbox"/> SAFETY OFFICER | <input type="checkbox"/> TOURNAMENT | |
| | <input type="checkbox"/> SENIOR (13-16) | <input type="checkbox"/> VOLUNTEER WORKER | <input type="checkbox"/> OTHER (Describe) | |
| | <input type="checkbox"/> BIG (14-18) | | | |

I hereby certify that I have read the answers to all parts of this form and to the best of my knowledge and belief the information contained is complete and correct as herein given.

I understand that it is a crime for any person to intentionally attempt to defraud or knowingly facilitate a fraud against an insurer by submitting an application or filing a claim containing a false or deceptive statement(s). See Remarks section on reverse side of form.

I hereby authorize any physician, hospital or other medically related facility, insurance company or other organization, institution or person that has any records or knowledge of me, and/or the above named claimant, or our health, to disclose, whenever requested to do so by Little League and/or National Union Fire Insurance Company of Pittsburgh, Pa. A photostatic copy of this authorization shall be considered as effective and valid as the original.

Date	Claimant/Parent/Guardian Signature (In a two parent household, both parents must sign this form.)
Date	Claimant/Parent/Guardian Signature



For Residents of California:

Any person who knowingly presents a false or fraudulent claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

For Residents of New York:

Any person who knowingly and with the intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

For Residents of Pennsylvania:

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

For Residents of All Other States:

Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

PART 2 - LEAGUE STATEMENT (Other than Parent or Claimant)

Name of League	Name of Injured Person/Claimant	League I.D. Number
Name of League Official	Position in League	
Address of League Official	Telephone Numbers (Inc. Area Codes) Residence: () Business: () Fax: ()	

Were you a witness to the accident? Yes No
Provide names and addresses of any known witnesses to the reported accident.

Check the boxes for all appropriate items below. At least one item in each column must be selected.

POSITION WHEN INJURED	INJURY	PART OF BODY	CAUSE OF INJURY
<input type="checkbox"/> 01 1ST	<input type="checkbox"/> 01 ABRASION	<input type="checkbox"/> 01 ABDOMEN	<input type="checkbox"/> 01 BATTED BALL
<input type="checkbox"/> 02 2ND	<input type="checkbox"/> 02 BITES	<input type="checkbox"/> 02 ANKLE	<input type="checkbox"/> 02 BATTING
<input type="checkbox"/> 03 3RD	<input type="checkbox"/> 03 CONCUSSION	<input type="checkbox"/> 03 ARM	<input type="checkbox"/> 03 CATCHING
<input type="checkbox"/> 04 BATTER	<input type="checkbox"/> 04 CONTUSION	<input type="checkbox"/> 04 BACK	<input type="checkbox"/> 04 COLLIDING
<input type="checkbox"/> 05 BENCH	<input type="checkbox"/> 05 DENTAL	<input type="checkbox"/> 05 CHEST	<input type="checkbox"/> 05 COLLIDING WITH FENCE
<input type="checkbox"/> 06 BULLPEN	<input type="checkbox"/> 06 DISLOCATION	<input type="checkbox"/> 06 EAR	<input type="checkbox"/> 06 FALLING
<input type="checkbox"/> 07 CATCHER	<input type="checkbox"/> 07 DISMEMBERMENT	<input type="checkbox"/> 07 ELBOW	<input type="checkbox"/> 07 HIT BY BAT
<input type="checkbox"/> 08 COACH	<input type="checkbox"/> 08 EPIPHYSES	<input type="checkbox"/> 08 EYE	<input type="checkbox"/> 08 HORSEPLAY
<input type="checkbox"/> 09 COACHING BOX	<input type="checkbox"/> 09 FATALITY	<input type="checkbox"/> 09 FACE	<input type="checkbox"/> 09 PITCHED BALL
<input type="checkbox"/> 10 DUGOUT	<input type="checkbox"/> 10 FRACTURE	<input type="checkbox"/> 10 FATALITY	<input type="checkbox"/> 10 RUNNING
<input type="checkbox"/> 11 MANAGER	<input type="checkbox"/> 11 HEMATOMA	<input type="checkbox"/> 11 FOOT	<input type="checkbox"/> 11 SHARP OBJECT
<input type="checkbox"/> 12 ON DECK	<input type="checkbox"/> 12 HEMORRHAGE	<input type="checkbox"/> 12 HAND	<input type="checkbox"/> 12 SLIDING
<input type="checkbox"/> 13 OUTFIELD	<input type="checkbox"/> 13 LACERATION	<input type="checkbox"/> 13 HEAD	<input type="checkbox"/> 13 TAGGING
<input type="checkbox"/> 14 PITCHER	<input type="checkbox"/> 14 PUNCTURE	<input type="checkbox"/> 14 HIP	<input type="checkbox"/> 14 THROWING
<input type="checkbox"/> 15 RUNNER	<input type="checkbox"/> 15 RUPTURE	<input type="checkbox"/> 15 KNEE	<input type="checkbox"/> 15 THROWN BALL
<input type="checkbox"/> 16 SCOREKEEPER	<input type="checkbox"/> 16 SPRAIN	<input type="checkbox"/> 16 LEG	<input type="checkbox"/> 16 OTHER
<input type="checkbox"/> 17 SHORTSTOP	<input type="checkbox"/> 17 SUNSTROKE	<input type="checkbox"/> 17 LIPS	<input type="checkbox"/> 17 UNKNOWN
<input type="checkbox"/> 18 TO/FROM GAME	<input type="checkbox"/> 18 OTHER	<input type="checkbox"/> 18 MOUTH	
<input type="checkbox"/> 19 UMPIRE	<input type="checkbox"/> 19 UNKNOWN	<input type="checkbox"/> 19 NECK	
<input type="checkbox"/> 20 OTHER	<input type="checkbox"/> 20 PARALYSIS/ PARAPLEGIC	<input type="checkbox"/> 20 NOSE	
<input type="checkbox"/> 21 UNKNOWN		<input type="checkbox"/> 21 SHOULDER	
<input type="checkbox"/> 22 WARMING UP		<input type="checkbox"/> 22 SIDE	
		<input type="checkbox"/> 23 TEETH	
		<input type="checkbox"/> 24 TESTICLE	
		<input type="checkbox"/> 25 WRIST	
		<input type="checkbox"/> 26 UNKNOWN	
		<input type="checkbox"/> 27 FINGER	

Does your league use batting helmets with attached face guards? YES NO
If YES, are they Mandatory or Optional At what levels are they used?

I hereby certify that the above named claimant was injured while covered by the Little League Baseball Accident Insurance Policy at the time of the reported accident. I also certify that the information contained in the Claimant's Notification is true and correct as stated, to the best of my knowledge.

Date	League Official Signature
------	---------------------------



Little League® Baseball & Softball
CLAIM FORM INSTRUCTIONS



WARNING — It is important that parents/guardians and players note that: *Protective equipment cannot prevent all injuries a player might receive while participating in baseball/softball.*

To expedite league personnel’s reporting of injuries, we have prepared guidelines to use as a checklist in completing reports. It will save time -- and speed your payment of claims.

The National Union Fire Insurance Company of Pittsburgh, Pa. (NUFIC) Accident Master Policy acquired through Little League® contains an “Excess Coverage Provision” whereby all personal and/or group insurance shall be used first.

The Accident Claim Form must be fully completed, including a Social Security Number, for processing. To help explain insurance coverage to parents/guardians refer to *What Parents Should Know* on the internet that should be reproduced on your league’s letterhead and distributed to parents/guardians of all participants at registration time.

If injuries occur, initially it is necessary to determine whether claimant’s parents/guardians or the claimant has other insurance such as group, employer, Blue Cross and Blue Shield, etc., which pays benefits. (This information should be obtained at the time of registration prior to tryouts.) If such coverage is provided, the claim must be filed first with the primary company under which the parent/guardian or claimant is insured.

When filing a claim, all medical costs should be fully itemized and forwarded to Little League International. If no other insurance is in effect, a letter from the parent/guardian or claimant’s employer explaining the lack of group or employer insurance should accompany the claim form.

The NUFIC Accident Policy is acquired by leagues, not parents, and provides comprehensive coverage at an affordable cost. Accident coverage is underwritten by National Union Fire Insurance Company of Pittsburgh, a Pennsylvania Insurance company, with its principal place of business at 175 Water Street, 18th Floor, New York, NY 10038. It is currently authorized to transact business in all states and the District of Columbia. NAIC Number 19445. This is a brief description of the coverage available under the policy. The policy will contain limitations, exclusions, and termination provisions. Full details of the coverage are contained in the Policy. If there are any conflicts between this document and the Policy, the Policy shall govern.

The current insurance rates would not be possible without your help in stressing safety programs at the local level. The ASAP manual, **League Safety Officer Program Kit**, is recommended for use by your Safety Officer.



TREATMENT OF DENTAL INJURIES

Deferred Dental Treatment for claims or injuries occurring in 2002 and beyond: If the insured incurs injury to sound, natural teeth and necessary treatment requires that dental treatment for that injury must be postponed to a date more than 52 weeks after the date of the injury due to, but not limited to, the physiological changes occurring to an insured who is a growing child, we will pay the lesser of the maximum benefit of \$1,500.00 or the reasonable expense incurred for the deferred dental treatment. Reasonable expenses incurred for deferred dental treatment are only covered if they are incurred on or before the insured's 23rd birthday. Reasonable Expenses incurred for deferred root canal therapy are only covered if they are incurred within 104 weeks after the date the Injury is sustained.

CHECKLIST FOR PREPARING CLAIM FORM

1. Print or type all information.
2. Complete all portions of the claim form before mailing to our office.
3. Be sure to include league name and league ID number.

PART I - CLAIMANT, OR PARENT(S)/GUARDIAN(S), IF CLAIMANT IS A MINOR

1. The adult claimant or parent(s)/guardians(s) must sign this section, if the claimant is a minor.
2. Give the name and address of the injured person, along with the name and address of the parent(s)/guardian(s), if claimant is a minor.
3. Fill out all sections, including check marks in the appropriate boxes for all categories. Do not leave any section blank. This will cause a delay in processing your claim and a copy of the claim form will be returned to you for completion.
4. It is mandatory to forward information on other insurance. Without that information there will be a delay in processing your claim. If no insurance, written verification from each parent/spouse employer must be submitted.
5. Be certain all necessary papers are attached to the claim form. (See instruction 3.) Only itemized bills are acceptable.
6. On dental claims, it is necessary to submit charges to the major medical and dental insurance company of the claimant, or parent(s)/guardian(s) if claimant is a minor. "Accident-related treatment to whole, sound, natural teeth as a direct and independent result of an accident" must be stated on the form and bills. Please forward a copy of the insurance company's response to Little League International. Include the claimant's name, league ID, and year of the injury on the form.

PART II - LEAGUE STATEMENT

1. This section must be filled out, signed and dated by the league official.
2. Fill out all sections, including check marks in the appropriate boxes for all categories. Do not leave any section blank. This will cause a delay in processing your claim and a copy of the claim form will be returned to you for completion. !

IMPORTANT: Notification of a claim should be filed with Little League International within 20 days of the incident for the current season.



For Local League Use Only

Activities/Reporting

A Safety Awareness Program's Incident/Injury Tracking Report

League Name: _____ League ID: ____ - ____ - ____ Incident Date: _____
 Field Name/Location: _____ Incident Time: _____
 Injured Person's Name: _____ Date of Birth: _____
 Address: _____ Age: _____ Sex: Male Female
 City: _____ State _____ ZIP: _____ Home Phone: () _____
 Parent's Name (If Player): _____ Work Phone: () _____

 Parents' Address (If Different): _____ City _____

Incident occurred while participating in:

A.) Baseball Softball Challenger TAD
 B.) Challenger T-Ball Minor Major Intermediate (50/70)
 Junior Senior Big League
 C.) Tryout Practice Game Tournament Special Event
 Travel to Travel from Other (Describe): _____

Position/Role of person(s) involved in incident:

D.) Batter Baserunner Pitcher Catcher First Base Second
 Third Short Stop Left Field Center Field Right Field Dugout
 Umpire Coach/Manager Spectator Volunteer Other: _____

Type of injury: _____

Was first aid required? Yes No If yes, what: _____

Was professional medical treatment required? Yes No If yes, what: _____
 (If yes, the player must present a non-restrictive medical release prior to to being allowed in a game or practice.)

Type of incident and location:

<p>A.) On Primary Playing Field</p> <p><input type="checkbox"/> Base Path: <input type="checkbox"/> Running <i>or</i> <input type="checkbox"/> Sliding</p> <p><input type="checkbox"/> Hit by Ball: <input type="checkbox"/> Pitched <i>or</i> <input type="checkbox"/> Thrown <i>or</i> <input type="checkbox"/> Batted</p> <p><input type="checkbox"/> Collision with: <input type="checkbox"/> Player <i>or</i> <input type="checkbox"/> Structure</p> <p><input type="checkbox"/> Grounds Defect</p> <p><input type="checkbox"/> Other: _____</p>	<p>B.) Adjacent to Playing Field</p> <p><input type="checkbox"/> Seating Area</p> <p><input type="checkbox"/> Parking Area</p> <p>C.) Concession Area</p> <p><input type="checkbox"/> Volunteer Worker</p> <p><input type="checkbox"/> Customer/Bystander</p>	<p>D.) Off Ball Field</p> <p><input type="checkbox"/> Travel:</p> <p><input type="checkbox"/> Car <i>or</i> <input type="checkbox"/> Bike <i>or</i></p> <p><input type="checkbox"/> Walking</p> <p><input type="checkbox"/> League Activity</p> <p><input type="checkbox"/> Other: _____</p>
---	---	--

Please give a short description of incident: _____

Could this accident have been avoided? How: _____

This form is for local Little League use only (should not be sent to Little League International). This document should be used to evaluate potential safety hazards, unsafe practices and/or to contribute positive ideas in order to improve league safety. When an accident occurs, obtain as much information as possible. For all Accident claims or injuries that could become claims to any eligible participant under the Accident Insurance policy, please complete the Accident Notification Claim form available at http://www.littleleague.org/Assets/forms_pubs/asap/AccidentClaimForm.pdf and send to Little League International. For all other claims to non-eligible participants under the Accident policy or claims that may result in litigation, please fill out the General Liability Claim form available here: http://www.littleleague.org/Assets/forms_pubs/asap/GLClaimForm.pdf.

Prepared By/Position: _____ Phone Number: (____) _____
 Signature: _____ Date: _____



Little League® "Basic" Volunteer Application – 2021
 Do not use forms from past years. Use extra paper to complete if additional space is required.

This volunteer application can be used as a reference for leagues utilizing the JDP Quick App or for leagues that are using an outside background check provider that meets the standards of Little League Regulation 1(c)(9). Visit LittleLeague.org/localRGcheck for more information.

All RED fields are required.

Name: _____
First Middle Name or Initial Last

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Work Phone: _____ E-mail Address: _____

Driver's license #: _____

- Have you ever been charged with, convicted of, plead no contest, or guilty to any crime(s) involving or against a minor, or of a sexual nature?
 If yes, describe each in full: _____ Yes No
(If volunteer answered yes to Question 1, the local league must contact the Little League Security Manager.)
- Have you ever been convicted of or plead no contest or guilty to any crime(s)? Yes No
(Answering yes to Question 2, does not automatically disqualify you as a volunteer.)
- Do you have any criminal charges pending against you regarding any crime(s)? Yes No
(Answering yes to Question 3, does not automatically disqualify you as a volunteer.)
- Have you ever been released participation in any other youth programs and/or listed on the SafeSport Centralized Disciplinary Database or USA Baseball Ineligible list? Yes No
If yes, explain: _____
 (If volunteer answered yes to Question 4, the local league must contact the Little League Security Manager.)
- In which of the following would you like to participate? (Check one or more.)
 League Official Field Maintenance Concession Stand
 Coach Manager Other _____
 Umpire Scorekeeper

A COPY OF VALID GOVERNMENT ISSUED PHOTO IDENTIFICATION MUST BE ATTACHED TO COMPLETE THIS APPLICATION (NOT NECESSARY IF VOLUNTEER IS RETURNING).
 Please provide updated information below if there are any changes from previous years or requesting a new position.

Occupation: _____

Employer: _____

Address: _____

Special professional training, skills, hobbies: _____

Special Certifications (CPR, Medical, etc.): _____

Special Affiliations (Clubs, Services Organizations, etc.): _____

Previous volunteer experience (including baseball/softball and years (s)): _____

IF YOU LIVE IN A STATE THAT REQUIRES A SEPARATE BACKGROUND CHECK BY LAW, PLEASE ATTACH A COPY OF THAT STATE'S BACKGROUND CHECK. FOR MORE INFORMATION ON STATE LAWS, VISIT OUR WEBSITE: LittleLeague.org/StateLaws

AS A CONDITION OF VOLUNTEERING, I give permission for the Little League organization to conduct background check(s) on me now and as long as I continue to be active with the organization, which may include a review of sex offender registries (some of which contain names only searches which may result in a report being generated that may or may not be me), child abuse and criminal history records. I understand that, if appointed, my position is conditional upon the league receiving an appropriate information on my background. I hereby release and agree to hold harmless from liability the local Little League, Little League Baseball, Incorporated, the officers, employees and volunteers thereof, or any other person or organization that may provide such information. I also understand that, regardless of previous appointments, Little League is not obligated to appoint me to a volunteer position. If appointed, I understand that, prior to the expiration of my term, I am subject to suspension by the President and removal by the Board of Directors for violation of Little League policies or principles.

Applicant Name (please print or type) _____

Applicant Signature _____ Date _____

If Minor/Parent Signature _____ Date _____

NOTE: The local Little League and Little League Baseball, Incorporated will not discriminate against any person on the basis of race, creed, color, national origin, marital status, gender, sexual orientation or disability.

LOCAL LEAGUE USE ONLY:

Background check completed by league officer _____ on _____

System(s) used for background check (minimum of one must be checked):
Review the Little League Regulation 1(c)(9) for all background check requirements

JDP (Includes review of the SafeSport Centralized Disciplinary and USA Baseball Ineligible list)*
 OR
 National Criminal Database check SafeSport Centralized Disciplinary Database and/or USA Baseball Ineligible List Sex Offender
 National Sex Offender Registry

*Please be advised that if you use JDP and there is a name match in the few states where only name search searches can be performed you should notify volunteers that they will receive a letter or email directly from JDP in compliance with the Fair Credit Reporting Act containing information regarding all the criminal records associated with the names, which may not necessarily be the league volunteers.

Only attach to this application copies of background check reports that reveal convictions of this application.

form updated: 10/21/2020



Little League® Volunteer Application – 2021

Do not use forms from past years. Use extra paper to complete if additional space is required.

This volunteer application should only be used if a league is manually entering information into JDP or an outside background check provider that meets the standards of Little League Regulations 1(c)(9). THIS FORM SHOULD NOT BE COMPLETED IF A LEAGUE IS UTILIZING THE JDP QUICKAPP. Visit LittleLeague.org/LocalBGcheck for more information.

A COPY OF VALID GOVERNMENT ISSUED PHOTO IDENTIFICATION MUST BE ATTACHED TO COMPLETE THIS APPLICATION.

All RED fields are required.

Name _____ Date _____
First Middle Name or Initial Last

Address _____
 City _____ State _____ Zip _____

Social Security # (mandatory) _____

Cell Phone _____ Business Phone _____
 Home Phone _____ E-mail Address _____

Date of Birth _____
 Occupation _____
 Employer _____
 Address _____

Special professional training, skills, hobbies: _____

Community affiliations (Clubs, Service Organizations, etc.): _____

Previous volunteer experience (including baseball/softball and year): _____

1. Do you have children in the program? Yes No
 If yes, list full name and what level? _____

2. Special Certification (CPR, Medical, etc.)? If yes, list: _____ Yes No

3. Do you have a valid driver's license? Yes No
 Driver's license #: _____ State _____

4. Have you ever been charged with, convicted of, plead no contest, or guilty to any crime(s) involving or against a minor, or of a sexual nature? Yes No
 If yes, describe each in full: _____
 (If volunteer answered yes to Question 4, the local league must contact the Little League Security Manager.)

5. Have you ever been convicted of or plead no contest or guilty to any crime(s)? Yes No
 If yes, describe each in full: _____
 (Answering yes to Question 5, does not automatically disqualify you as a volunteer.)

6. Do you have any criminal charges pending against you regarding any crime(s)? Yes No
 If yes, describe each in full: _____
 (Answering yes to Question 6, does not automatically disqualify you as a volunteer.)

7. Have you ever been refused participation in any other youth programs and/or listed on the SafeSport Centralized Disciplinary Database or USA Baseball Ineligible list? Yes No
 If yes, explain: _____
 (If volunteer answered yes to Question 7, the local league must contact the Little League Security Manager.)

In which of the following would you like to participate? (Check one or more.)
 League Official Umpire Manager Concession Stand
 Coach Field Maintenance Scorekeeper Other _____

Please list three references, at least one of which has knowledge of your participation as a volunteer in a youth program:
 Name/Phone _____

IF YOU LIVE IN A STATE THAT REQUIRES A SEPARATE BACKGROUND CHECK BY LAW, PLEASE ATTACH A COPY OF THAT STATE'S BACKGROUND CHECK. FOR MORE INFORMATION ON STATE LAWS, VISIT OUR WEBSITE: LittleLeague.org/USStateLaws

AS A CONDITION OF VOLUNTEERING, I give permission for the Little League organization to conduct background check(s) on me now and as long as I continue to be active with the organization, which may include a review of one offender register (some of which contain name only searches which may result in a report being generated that may or may not be me), child abuse and criminal history records. I understand that, if appointed, my position is conditional upon the league receiving no inappropriate information on my background. I hereby release and agree to hold harmless from liability the local Little League, Little League Baseball, Incorporated, the officers, employees and volunteers thereof, or any other person or organization that may provide such information. I also understand that, regardless of previous appointments, Little League is not obligated to appoint me to a volunteer position. If appointed, I understand that, prior to the expiration of my term, I am subject to suspension by the President and removed by the Board of Directors for violation of Little League policies or principles.

Applicant Signature _____ Date _____
 If Minor/Parent Signature _____ Date _____
 Applicant Name (please print or type) _____

NOTE: The local Little League and Little League Baseball, Incorporated will not discriminate against any person on the basis of race, creed, color, national origin, marital status, gender, sexual orientation or disability.

LOCAL LEAGUE USE ONLY:

Background check completed by league officer _____ on _____

System(s) used for background check (minimum of one must be checked):
Review the Little League Regulation 1(c)(9) for all background check requirements

JDP (Includes review of the SafeSport Centralized Disciplinary and USA Baseball Ineligible list)*

OR

National Criminal Database check SafeSport Centralized Disciplinary Database and/or
 National Sex Offender Registry USA Baseball Ineligible list Sex Offender

*Please be advised that if you use JDP and there is a name match in the law states where only name search searches can be performed you should notify volunteers that they will receive a letter or email directly from JDP in compliance with the Fair Credit Reporting Act containing information regarding all the criminal records associated with the name, which may not necessarily be the league volunteer.

Only attach to this application copies of background check reports that reveal convictions of this application.

Last Updated: 10/29/2020



ACKNOWLEDGMENT OF RECEIPT AND REVIEW OF THE LEAGUE SAFETY MANUAL AND FIRST AID KIT

Manager Name:

Team Name:

Division:

Date:

I, as a team manager hereby certify to Lake Elsinore Little League and its Board of Directors that (1) I have received a League provided First Aid Kit and (2) I have received and reviewed the Lake Elsinore Little League Safety Manual, understand its contents and agree to adhere (and require my players to adhere) to the safety procedures contained therein.

Signature of Team Manager



CODES OF CONDUCT

At the team meeting, the Manager must read the Players Code of Conduct, the Coaches Code of Conduct and the Parents Code of Conduct to all in attendance. (See attachments.)

Managers must also make a copy of all three Codes of Conduct and distribute them to the coaches, parents and players of their team. All coaches, parents and players must sign these forms and return them to the manager. Managers must keep the originals of the signed forms and return a signed copy to the parents. When reading the Players Code of Conduct at the Team Meeting, the team Manager should discuss what the Code means, provide examples, and engage in a short discussion of the context and content of the Code. Parents should be encouraged to discuss it further with their children.

REMEMBER, MANAGERS AND COACHES ARE ROLE MODELS AND MUST ACT IN A MANNER CONSISTENT WITH THE CODE OF CONDUCT AND WITH THE HIGHEST LEVEL OF MORAL AND ETHICAL CHARACTER.

CODE OF CONDUCT CERTIFICATION FORM

Each manager, coach, player and parent must sign the applicable Code of Conduct as having read and discussed it. (See attachment.) Each team Manager should keep the original signed forms with him / her at all practices and games. Managers will need to certify to the Board that they have received ALL signed forms PRIOR to their first GAME. Players without signed Players Codes of Conduct and Parents Codes of Conduct will NOT be allowed to play in games. Completed Code of Conduct Certification Forms should be returned to the LELL President or LELL Vice-President.



Lake Elsinore Little League Safety Code Certification Form

Manager Name: _____

Team Name: _____

Division: _____

Date: _____

I, as a team manager or coach, hereby certify to Lake Elsinore Little League and its Board of Directors that I have reviewed, discussed with and explained to all players and parents on my team the Lake Elsinore Little League Safety Code and agree to abide by and enforce such Code.

Signature of Team Manager

Signature of Team Coach

Name Printed

Signature of Team Coach

Name Printed

Signature of Team Coach

Name Printed

[CERTIFICATION AND SIGNATURES CONTINUED ON FOLLOWING PAGE]



I, as a team player, hereby certify to Lake Elsinore Little League and its Board of Directors that I have read, reviewed with my coach and understand the Lake Elsinore Little League Safety Code and agree to abide by it.

Signature of Player

Name of Player

Signature of Player

Name of Player

Signature of Player

Name of Player

Signature of Player

Name of Player

Signature of Player

Name of Player

Signature of Player

Name of Player

Signature of Player

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Name of Player

Signature of Player

Name of Player

Signature of Player

Name of Player

Signature of Player

Name of Player

Signature of Player

Name of Player



LAKE ELSINORE LITTLE LEAGUE CODE OF CONDUCT

PARENTS AND SPECTATORS

The Board of Directors of Lake Elsinore Little League has mandated the following Code of Conduct for all Parents and Spectators. Parents of all players are required to sign this Code of Conduct indicating that he/she has reviewed and understands and agrees to comply with this Code of Conduct.

All Parents and Spectators Shall:

- PROVIDE POSITIVE SUPPORT, CARE AND ENCOURAGEMENT FOR MY CHILD AND OTHER CHILDREN PARTICIPATING THE LEAGUE.
- BE SUPPORTIVE AND UNDERSTANDING OF OTHER ADULTS, INCLUDING UMPIRES AND PARENTS OF THE OPPOSING PLAYERS INVOLVED IN THE GAME.
- NOT, AT ANY TIME, LAY A HAND UPON, PUSH, SHOVE, STRIKE OR THREATEN TO STRIKE AN OFFICIAL, UMPIRE, BOARD MEMBER, COACH, PLAYER OR OTHER SPECTATOR.
- NOT VERBALLY ABUSE, INSULT OR SPEAK DISRESPECTFULLY TO ANY OFFICIAL, UMPIRE, BOARD MEMBER, COACH OR OTHER SPECTATOR.
- ENCOURAGE AND RECOGNIZE GOOD SPORTSMANSHIP FROM ALL PLAYERS.
- PLACE THE EMOTIONAL AND PHYSICAL WELL BEING OF MY CHILD AND OTHER CHILDREN AHEAD OF A PERSONAL DESIRE TO WIN.
- INSIST THAT MY CHILD PLAYS IN AS SAFE AND HEALTHY AN ENVIRONMENT AS POSSIBLE.
- SUPPORT COACHES AND OFFICIALS WORKING WITH MY CHILD IN ORDER TO ENCOURAGE A POSITIVE EXPERIENCE FOR ALL.
- REFRAIN FROM USING, ANYWHERE AT THE LELL FIELDS, AND DEMAND AN ENVIRONMENT AT LAKE ELSINORE LITTLE LEAGUE THAT IS FREE



OF DRUGS, TOBACCO AND ALCOHOL.

- REMEMBER THAT THE GAME IS FOR THE KIDS, NOT THE ADULTS.
- DO MY BEST TO MAKE THE LITTLE LEAGUE EXPERIENCE FUN FOR MY CHILD.
- ASK MY CHILD TO TREAT OTHER PLAYERS, COACHES AND OFFICIALS WITH RESPECT.

The Lake Elsinore Little League Board of Directors will review all infractions of the Code of Conduct. Depending on the seriousness or frequency, the Board may assess disciplinary action up to and including expulsion from the league. I have read the Lake Elsinore Little League Code of Conduct and promise to adhere to its rules and regulations.

SIGNATURE

DATE

PRINT NAME

SIGNATURE

DATE

PRINT NAME

TEAM NAME AND DIVISION (E.G., AAA MINORS)



LAKE ELSINORE LITTLE LEAGUE CODE OF CONDUCT

PLAYERS

The Board of Directors of Lake Elsinore Little League has mandated the following Code of Conduct for all Players. All Players are required to sign this Code of Conduct indicating that he/she has reviewed and understands and agrees to comply with this Code of Conduct.

All Players Shall:

- NEVER ARGUE WITH AN UMPIRE, OR PROTEST AN UMPIRE'S CALL.
- NEVER THROW EQUIPMENT.
- NEVER PUSH, SHOVE, HIT OR THREATEN TO HIT AN UMPIRE, COACH OR PLAYER.
- ALWAYS SHOW RESPECT FOR TEAMMATES, COACHES, OPPONENTS, PARENTS, SPECTATORS AND THE UMPIRES.
- NOT USE BAD LANGUAGE.
- NOT INSULT OTHERS BECAUSE OF PLAYING ABILITY OR COLOR, SEX, RACE, RELIGION, OR ANYTHING THAT MAKES THEM DIFFERENT.
- NOT SHOUT AT, ABUSE OR TRY TO MAKE THE OPPONENTS OR OTHER PLAYERS LOSE CONCENTRATION.
- CHEER FOR AND ENCOURAGE YOUR OWN PLAYERS.
- PLAY FAIRLY AND HONESTLY AT ALL TIMES.
- BE MODEST IN VICTORY AND DIGNIFIED IN DEFEAT.
- AFTER ALL GAMES, HAVE A CHEER FOR THE OTHER TEAM AND SHAKE HANDS/HIGH FIVE.
- ALWAYS THANK THE COACHES OF BOTH TEAMS AND THE UMPIRES.



-
- PLAY TO THE BEST OF YOUR ABILITY AND GIVE 100% EFFORT AT ALL PRACTICES AND GAMES.
 - HAVE GOOD SPORTSMANSHIP.

The Lake Elsinore Little League Board of Directors will review all infractions of the Code of Conduct. Depending on the seriousness or frequency, the Board may assess disciplinary action up to and including expulsion from the league. I have read the Lake Elsinore Little League Code of Conduct and promise to adhere to its rules and regulations.

PLAYER'S SIGNATURE

DATE

PLAYER'S NAME, TEAM AND DIVISION (E.G., AAA MINORS)



LAKE ELSINORE LITTLE LEAGUE CODE OF CONDUCT

MANAGERS AND COACHES

The Board of Directors of Lake Elsinore Little League has mandated the following Code of Conduct for all Managers and Coaches. All Managers and Coaches are required to sign this Code of Conduct indicating that he/she has reviewed and understands and agrees to comply with this Code of Conduct.

All Managers and Coaches shall:

- NOT, AT ANY TIME, LAY A HAND UPON, PUSH, SHOVE, STRIKE OR THREATEN TO STRIKE AN OFFICIAL, UMPIRE, BOARD MEMBER, COACH, PLAYER OR SPECTATOR.
- NOT VERBALLY ABUSE, INSULT OR SPEAK DISRESPECTFULLY TO ANY OFFICIAL, UMPIRE, BOARD MEMBER, COACH OR OTHER SPECTATOR.
- PLACE THE EMOTIONAL AND PHYSICAL WELL BEING OF MY PLAYERS AHEAD OF MY PERSONAL DESIRE TO WIN.
- TREAT EACH PLAYER AS AN INDIVIDUAL, REMEMBERING THE LARGE RANGE OF EMOTIONAL AND PHYSICAL DEVELOPMENT WITHIN THE SAME AGE GROUP.
- PROVIDE A SAFE PLAYING ENVIRONMENT FOR MY PLAYERS AND TO AHERE STICTLY TO ALL LEAGUE SAFTEY GUIDELINES.
- ORGANIZE PRACTICES THAT ARE FUN, CHALLENGING AND INSTRUCTIONAL FOR MY PLAYERS.
- REFRAIN FROM USING, ANYWHERE AT THE LELL FIELDS, AND PROVIDE AN ENVIRONMENT AT LAKE ELSINORE LITTLE LEAGUE THAT IS FREE OF DRUGS, TOBACCO AND ALCOHOL.
- BE KNOWLEDGEABLE IN THE RULES OF BASEBALL/SOFTBALL AND TO TEACH THESE RULES TO MY PLAYERS.
- USE THE APPROPRIATE COACHING TECHNIQUES FOR THE SKILLS THAT



I TEACH.

- REMEMBER THAT I AM A YOUTH BASEBALL COACH, AND THAT THE GAME IS FOR THE CHILDREN, NOT THE ADULTS.
- ENCOURAGE AND RECOGNIZE GOOD SPORTSMANSHIP FROM ALL PLAYERS AND SPECTATORS.
- BE A ROLE MODEL FOR ALL PLAYERS, OTHER COACHES AND SPECTATORS AND SHALL LEAD BY EXAMPLE UPHOLDING THE HIGHEST MORAL AND ETHICAL STANDARDS.
- EXPLAIN TO MY PLAYERS THE “PLAYERS” CODE OF CONDUCT AND ENFORCE COMPLIANCE SUCH CODE BY MY PLAYERS.

The Lake Elsinore Little League Board of Directors will review all infractions of the Code of Conduct. Depending on the seriousness or frequency, the Board may assess disciplinary action up to and including expulsion from the league. I have read the Lake Elsinore Little League Code of Conduct and promise to adhere to its rules and regulations.

SIGNATURE

DATE

PRINT NAME TEAM POSITION (MANAGER OR COACH)

TEAM NAME AND DIVISION (E.G., AAA MINORS)



Suggestions for Warm-up Drills



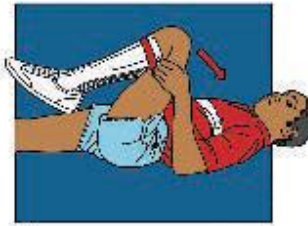
Heel Cord Stretches

Lean against a wall. Reach one leg behind you. Keep the knee straight, heel on the ground, and toes pointed forward. Slightly bend the leg that's closer to the wall. Lean forward. You should feel the stretch along the back of your calf. Repeat with other leg.



Head and Neck Circles

Make a circle with your head, going around first in one direction five times. Then reverse and make five circles in the opposite direction.



Low Back Stretches

Lie on your back, bring one knee up, and pull the knee slowly toward your chest. Hold and repeat three times. Switch legs and repeat.



Shoulder Stretches #1

Stand or sit, holding your throwing arm at the wrist with your other hand. Put your arm over your head and pull gently, feeling your upper arm against your head. You should feel the stretch inside your shoulder.



Shoulder Stretches #2

Stand or sit, holding onto the elbow of your throwing arm with your other hand. Gently pull your throwing arm across your chest. You should feel the stretch inside your shoulder, especially at the back.



Shoulder Stretches #3

Stand or sit with your pitching arm out to the side and your elbow bent. Move your arm back until you feel the stretch in the front of your shoulder.



Thigh Stretches #1

Sit on the ground. Stretch both legs out in front of you. Reach forward, touching your toes. Eventually, you want to lean forward far enough to put your head on your knees. You should feel the stretch along the backs of your legs.

Thigh Stretches #2

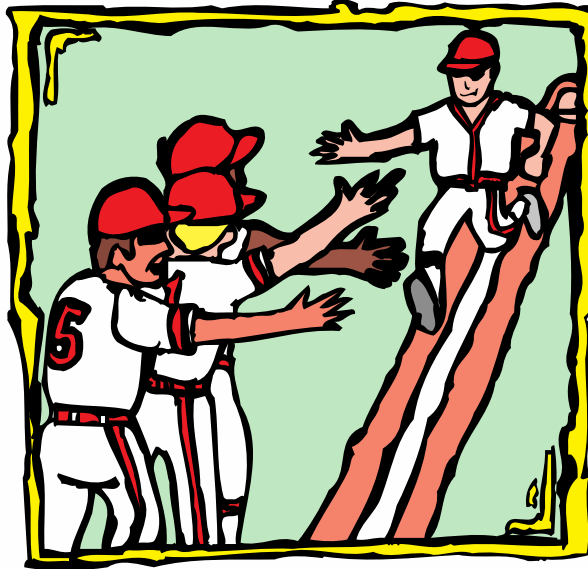
Sit on the ground with one leg stretched out in front of you. Bend the other knee and put your foot behind you. Lean backwards. You should feel the stretch along the front of your thigh.



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Keep It Clean!



REMEMBER:

**Use good sportsmanship on the field,
even to your language.**

Regulation XIV – Field Decorum

- a) “The actions of players, managers, coaches, umpires and league officials must be above reproach . . .”
- b) “The use of tobacco and alcoholic beverages in any form is prohibited on the playing field, benches or dugouts.”

Copy and post at dugouts.



HAVE YOU:

- Walked field for debris/foreign objects**
- Inspected helmets, bats, catchers' gear**
- Made sure a First Aid kit is available**
- Checked conditions of fences, backstops, bases and warning track**
- Made sure a working telephone is available**
- Held a warm-up drill**



Manager/Coach's Safety Notes



LAKE ELSINORE LITTLE LEAGUE RETURN TO PLAY GUIDELINES RELATED TO COVID-19

[08-17-2020](#)

Lake Elsinore Little League Temporary Return to Play Guidelines Related to COVID-19

League Name: Lake Elsinore Little League
Address: 500 W. Graham, Unit 729, Lake Elsinore, CA 92530
League ID: 405-28-12
Registration ID: 33-0008788



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Criteria for returning back to play on the baseball field

These guidelines are designed to address the policies and procedures Lake Elsinore Little League is implementing or has already implemented as we return to the playing field from our time away due to COVID-19. The guidelines are based on information provided by the Centers for Disease Control and Prevention (CDC) along with references to information



found on the Little League International website. As guidelines continue to change and new information is found, these guidelines may be revised and updated accordingly.

Measures to Ensure Player and Coach Safety:

- Physical distancing of six (6) feet between each player and between players and coaches is required at all times.
- All players, coaches, family members, and visitors are required to wear an appropriate face covering that covers the nose and mouth at all times. This applies to all adults and children 2 years of age and older. Masks with one-way valves may not be used. Only individuals who have been instructed not to wear a face-covering by their medical provider due to a medical condition, mental health condition, or disability that prevents wearing a covering are exempt from wearing one. Players should take a break from exercise if any difficulty breathing is noted and should change their mask or face covering if it becomes wet and sticks to the player's face and obstructs breathing. Masks that restrict airflow under heavy exertions (such as N95 masks) are not advised for exercise.
- Screening is conducted before players and coaches may participate in youth sports activities. Checks must include a check-in concerning fever, cough, shortness of breath, difficulty breathing and fever or chills, and whether the person has had contact with a person known or suspected to be infected with COVID-19 within the 14 days. These checks can be done in person or through alternative methods such as on-line check-in systems or through signage posted at the entrance to the facility stating that visitors with these symptoms should not enter the premises.
 - If the person has no symptoms and no contact with a known or suspected COVID-19 case in the last 14 days, they can be cleared to participate for that day.
 - If the person has had contact with a known or suspected COVID-19 case in the last 14 days they should be sent home immediately and asked to quarantine at home. Provide them with the quarantine instructions found at <https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick-/quarantine.html>.
 - If the person is showing any of the symptoms noted above they should be sent home immediately and asked to isolate at home. Provide them with the isolation instructions found at <https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick-/isolation.html>.
- Until further notice, all youth sports activities must only take place outdoors. Teams may utilize a canopy or other sun shelter, but only if the side of the canopy or sun shelter are not closed and there is sufficient outdoor air movement.



- All youth sporting events, including tournaments, events, or competitions are not permitted at this time. Practice games among players of the same team (intra-squad games, scrimmages, and/or matches) are allowed for non-contact sports only.
- Any areas where players are seated off-field or off-court (e.g., bench, dugout, bullpen) has been reconfigured to create additional seating such that players and coaches can maintain a physical distance of 6 feet while in the area.
- Youth sports programs should try to ensure that players remain in a stable cohort to limit the risk of transmission.
- Players and coaches should use hand sanitizer when handwashing is not practicable. Note: frequent handwashing is more effective than the use of hand sanitizers, especially when hands are visibly dirty.
- Encourage players to bring their own pre-filled reusable or purchased water bottles.
- When choosing cleaning products, use those approved for use against COVID-19 on the Environmental Protection Agency (EPA) -approved list “N” and follow product instructions. These products contain ingredients that are safer for individuals with asthma.
- Coaches and league representatives with the responsibility of cleaning and disinfecting the site must be equipped with the proper protective equipment, including gloves, eye protection, respiratory protection, and other appropriate protective equipment as required by the product instructions. All products must be kept out of children’s reach and stored in a space with restricted access.
- All coaches and league representatives have been told not to come to facilities if sick, or if they are exposed to a person who has COVID-19.
- Upon being informed that one or more coaches or players test positive for, or has symptoms consistent with COVID-19 (case), the team has a plan or protocol in place to have the case(s) isolate themselves at home and require the immediate self-quarantine of all players and coaches that had exposure to the case(s). The team or league’s plan should consider a protocol for all quarantined individuals to have access to or be tested for COVID-19 to determine whether there have been additional exposures, which may require additional COVID-19 control measures.
- If three (3) or more cases are identified among the members of the youth sports team within 14 days, the coach or league should report this outbreak to the Department of Public Health at (888) 397-3993 or (213) 240-7821.
- Coaches are instructed to wash or replace their face coverings daily.
- Employees, coaches, and youth team members have been reminded to adhere to personal prevention actions including:
 - Stay home when you are sick



- Stay home until at least 10 days have passed since your symptoms first appeared AND at least 24 hour after recovery, which means your fever has resolved without the use of fever-reducing medications and there is an improvement in your symptoms.
- If you tested positive for COVID-19 but never had any symptoms, you must stay home until
 - 10 days after the date of the first positive test, but
 - If you develop symptoms, you need to follow the instructions above
- Wash your hands often with soap and water for at least 20 seconds.
- Cover your coughs and sneezes with a tissue, and then dispose of the tissue and clean your hands immediately.
- Do no touch your mouth, eyes, nose with unwashed hands.
- Avoid contact with people who are sick.
- Avoid sharing items such as phones or other devices.
- Constantly observe your distances with other staff and players. Always maintain the recommended 6 feet separation from others unless specific tasks require less distancing and wear a face cloth covering when working near or with others.
- Disinfect frequently touched objects and surfaces. This should be done hourly during business hours.
- Copies of this Protocol have been distributed to all employees, youth, and families.

Maintenance Protocols for Coaches:

- Group gatherings are prohibited, and benches and tables are removed or cordoned off because they can't be used.
- Commonly used items are sanitized regularly
- Commonly used equipment is sanitized before and after each use
- Restrooms are sanitized regularly
- Water fountains, if any, are available to fill water bottles only.

Monitoring Protocols for Coaches:

- Instruction and information signage is posted throughout the facility regarding infection control, physical distancing, and the use of face coverings. Online outlets of the youth sports program (website, social media, etc.) provide clear information about physical distancing, use of face coverings, and other issues.
- Signs are posted that instruct visitors that they should stay home if sick with respiratory symptoms.
- Coaches and league managers monitor compliance of posted restrictions.



- Participants are asked to leave if not complying with these restrictions

Facility, Fan, and Administrative Guidance

CDC Resources (www.cdc.gov)

- [Reopening Guidance for Cleaning and Disinfecting Public Spaces](#)
- [Guidance for Cleaning and Disinfecting \(PDF Download\)](#)
- [Guidance for Administrators in Parks and Recreation Facilities](#)
- [Visiting Parks and Recreation Facilities](#)

Clean and Disinfect Shared Equipment and Surfaces:

- Clean AND disinfect frequently touched surfaces daily and in between all facility uses, including practices and games. This includes, but is not limited to, tables, doorknobs, light switches, countertops, handles, desks, phones, keyboards, facility equipment, dugouts, toilets, faucets, and sinks.
- If surfaces are visibly soiled and/or dirty, they should be cleaned immediately with a detergent or soap and water prior to disinfection.

Spread Out Scheduling of Practices and Games:

- League administrators will schedule sufficient time between practices and games to facilitate the completed evacuation of individuals from a previous practice or game from the premises before the next group enters.
- Avoid arriving to the field/premises earlier than necessary
- Players, families, spectators will be instructed not to show up to fields more than 45 minutes before game time
- Arrivals to the complex will be scheduled to help ensure a large number of individuals are not arriving at the same time.
- If there is a game or practice prior to your event, families and spectators shall be encouraged to stay in their vehicles or at recommended social distances until the start of their game play, to prevent overcrowding of spectator spaces and walkways.
- On-field warm-up should be limited, as much as reasonably possible, but no more than 30 minutes.
- Ensure that practices and games follow/coincide with all local and state directives regarding the number of people allowed to gather in one place.

Limiting Spectator Attendance:



- All spectators should follow best practices with regard to social/physical distancing – stay at least six (6) feet away from individuals outside of their household, wear a cloth facial covering, avoid direct hand or contact with players/managers/coaches during the game activity.
- Exposure may be minimized by limiting attendance to only “essential” volunteers (Managers, coaches, etc.) and limited numbers of family members.
- Spectators should bring their own seating or portable chairs when possible.
- Encourage the utilization of streaming opportunities to provide virtual spectating.
- Spectators or volunteers with any of the following conditions should not attend a practice or game, or come in close contact with any players until evaluated by a medical provider and given clearance to do so:
 - Active COVID-19 infection
 - Known direct contact with an individual testing positive for COVID-19
 - Fever
 - Cough
- Those at [higher risk for severe disease](#) should consider consultation with their medical provider before attending a game and should ensure the strictest adherence to guidelines regarding face coverings, distancing, and handwashing. Such groups include:
 - Those with a serious underlying medical condition, including heart disease, morbid obesity, diabetes, lung disease, immunocompromise, chronic kidney disease, and chronic lung disease.
 - Those currently residing in a nursing home or long-term care facility
 - Those over 65

Public Restrooms:

- Communicate information on available facilities and policies to all parents prior to resuming or beginning season.
- Access to public restrooms should be limited if possible
- A “one-in-one-out” policy, where only one individual is permitted within the restroom at one time, should be implemented to ensure adequate distancing in the confined restroom space.
- Prior to and after any league activity, restrooms should be thoroughly cleaned and disinfected. Restrooms should be disinfected on a regular basis.
- Public water fountains or refillable water stations should not be used, and should be turned off to discourage use, if possible.



Concession Stands:

- Food or concession sales should not be allowed at the facilities.
- Families are encouraged to bring their own food/beverages.
- If the snack bar is permitted to sell items, only items that are wrapped will be sold. All personnel should wear a facial covering and disposable gloves.
- Countertops should be cleaned and disinfected frequently.
- Limit the number of volunteers within the snack bar to 2 individuals.
- Keep patrons standing in line to purchase concessions to six (6) feet.

Post Information to Promote Everyday Preventive Actions:

- LELL will display posters and signs throughout the park/fields to frequently remind visitors to take steps to prevent the spread of COVID-19. These messages may include information about:
 - Staying home if you are sick or do not feel well, and what to do if you're sick or feel ill.
 - Using social/physical distancing and maintaining at least six feet between individuals in all areas of the park/fields.
 - The CDC [has downloadable resources available](#) to post at public places, and leagues are encouraged to utilize additional resources from their state or local authorities.

Member Communication:

- LELL will disseminate information to all families, volunteers, and spectators about the COVID-19 risk and the efforts our league will be undertaking to mitigate those risks, as outlined below. Information should be disseminated by way of email, league website, social media, coach talks, and public announcements.

On-Field Guidance

No Handshakes/Personal Contact Celebrations:

- Players and coaches should take measures to prevent all but the essential contact necessary to play the game. This should include refraining from handshakes, high fives, fist/elbow bumps, chest bumps, group celebrations, etc. Little League International suggests lining up outside the dugout and tipping caps to the opposing team as a sign of good sportsmanship after a game.
- Players and families should vacate the field/facility as soon as is reasonably possible after the conclusion of their game to minimize unnecessary contact with players, coaches, and spectators from the next game, ideally within 15 minutes.



Drinks and Snacks:

- Athletes, managers/coaches, and umpires should bring their own personal drinks to all team activities. Drinks should be labeled with the individual's name.
- Individuals should take their own drink containers home each night for cleaning and sanitation or use single-use bottles.
- There should be no use of shared or team beverages.
- Teams should not share any snacks or food. Players should bring individual, pre-packaged food, if needed.

Personal Protective Equipment (PPE):

- All managers/coaches, volunteers, umpires, etc., should wear PPE whenever applicable and possible, such as cloth face coverings and protective medical gloves.
- Players should wear cloth facial coverings when in close contact areas and in places where recommended social distancing is challenging or not feasible, such as in dugouts.
- Players should not wear protective medical gloves/disposable gloves on the field during game play.
- Players, especially at the younger divisions, are not required to wear a facial covering while on the field during game play.
- Players will be allowed/permitted to wear a cloth facial covering on the field of play during a game, if physically able to do so, based on the directive of a medical provider or individual determination of the player/parent/guardian.
- Cloth facial coverings should be placed on children under the age of two (2), anyone who has trouble breathing, or is unconscious, incapacitated or otherwise unable to remove the mask without assistance.

Dugouts:

- Managers/coaches and players should be assigned spots in the dugout or on the bleachers so that they are at least six feet apart and must be placed behind a fence.
- Players are to stay at their assigned spots when on the bench or while waiting their turn to bat.
- Players and managers/coaches should wear a facial covering while in the dugout.
- Dugouts should be cleaned and sanitized before and after each game.

Player Equipment:



- No personal player equipment/bat bags should be allowed in the dugout. Player equipment should be spaced accordingly outside the dugout to prevent direct contact.
- Players should have their own individual batter's helmet, glove, bat, and catcher's equipment, if possible.
- Measures should be taken to avoid, or minimize, equipment sharing when feasible.
- Some critical equipment may not be able to be obtained by every individual. When it is necessary to share critical or limited equipment, all surfaces of each piece of shared equipment must be cleaned and disinfected with an EPA-approved disinfectant against COVID-19 and allowed sufficient time to dry before being used by a new player. Increased attention should be paid to detailed cleaning of all equipment directly contacting the head and/or face (catcher's mask, helmets, etc.).
- Player's equipment (e.g. bags, helmets, bats, gloves, etc.) should be cleaned and disinfected after each use by a parent/guardian/caretaker, as needed.
- Individuals disinfecting equipment are encouraged to use gloves while using disinfectants and follow the manufacturer's directions for use. All disinfectants should be stored properly, in a safe area, out of the reach of children.

Baseballs and Softballs:

- Baseballs and softballs should be rotated through on a regular basis, at least every two (2) innings, to limit individual contact.
- Umpires should wipe down balls with a sanitizing wipe or disinfectant in between innings, if possible
- Umpires should limit their contact with the ball, allowing catchers to retrieve foul balls and/or passed balls whenever possible.
- Balls being utilized for infield/outfield warm-up should be isolated from a shared ball container.
- Foul balls landing outside the field of play should be retrieved by participating players, coaches, and umpires. Spectators/fans should limit contact with the playing field and should not retrieve the ball.

Spitting, Sunflower Seeds, Gum, etc.

- Sunflower seeds, gum, etc., should not be allowed in dugouts or on the field of play.
- All players and coaches should refrain from spitting at all times, including in dugout areas and on the field of play.
- Players shall not lick their fingers while on the field of play.



Game Operations and Umpire Guidelines

Pre-Game Plate Meetings:

- Plate meetings should be avoided, when possible.
- If plate meetings do occur, maintain at least six feet of distance between coaches/managers/umpires and players.
- Plate meetings should only consist of one manager or coach from each team, and game umpires.
- All participants should wear a cloth facial covering.
- No players should be a part of the plate meetings.

Equipment Inspection:

- Players should place their individual equipment in a well-spaced out manner for inspection. Umpires should avoid direct contact with equipment where possible but, when required, use hand sanitizer that contains at least 60 percent alcohol after the inspection of each individual piece of equipment.

Limit League / Game Volunteers:

- For each game, there should only be the required team managers/coaches, umpires, and one (1) league administrator (i.e. Safety Officer, player agent, etc.) in attendance.
- Practices should be limited to the manager/coaches and players.
- Scorekeeping should be done by team coaches or team parent/guardian via GameChanger or other electronic means, if possible. Proper social distancing should be practiced.
- Press boxes should not be utilized unless there is ample room for social distancing to occur within them.

Field Preparation and Maintenance:

- Fields should be mowed, raked, and lined prior to teams and spectators arriving at the complex and after they depart. It is encouraged that volunteers already participating in the game (managers/coaches, umpires, and league administrator) perform these tasks to limit individuals at the site.
- It is recommended that any shared field preparation equipment be sprayed or wiped with cleaner and disinfectant before and after each use.



Umpire Placement:

- Umpires are permitted to be placed behind the pitcher’s mound/circle to call balls and strikes. Umpires are encouraged to keep a safe distance from players as much as possible and wear protective gloves.
- If physically able, umpires are encouraged to wear cloth facial coverings while umpiring.

Additional Division-Specific Guidance

Tee Ball and Coach Pitch:

- Team numbers should be reduced, to help limit the number of individuals at practices and games.
- Volunteers are encouraged to be from the same household as players, as much as possible. Managers/coaches/volunteers should wear a cloth facial covering whenever possible.
- The focus on these divisions should be on fun and player development.

Little League Challenger Division and Senior Challenger Division:

- Buddies should be from the same household as the player whenever possible.
- Buddies should wear cloth facial coverings whenever possible, protective gloves are also encouraged.
- Parents/Guardians of players with high risk health concerns should consult a medical professional prior to having their player participate.

Little League Sandlot Fun Days:

- While activities should be player-led: the adult volunteers overseeing [Little League Sandlot Fun Day](#) events should provide a thorough overview of appropriate mitigation efforts and are responsible for ensuring these guidelines are followed.
- **How to Play?**
 - Ditch the rulebooks (for the most part). It’s up to the players. This is their game. It’s their decision. Give them the bats, balls, and field, and let them play. They could divide evenly into teams, or have predetermined teams, and played a structured game. They could rotate through pitching and hitting and running without a formal defense on the field. They can use a continuous order.



- **But what about the Parents and Caregivers?**
 - Parents, caregivers, and families are vital to the Little League Experience. For the LELL Sandlot Fun Days experience, though, that involvement stops at the parking lot. As hard as it is, that means the only thing that should be coming from the bleachers are some words of encouragement for everyone on the field, no coaching, yelling, umpiring, or trying to influence what's happening on the field. The LELL Sandlot Fun Day event must have one approved local Little League volunteer present at the game site to oversee the activities. Those adults' role is to help make sure the players are safe.
 - **Things that adult supervisors should not do without player approval:**
 - Umpire
 - If there is an umpire, they must follow the guidelines set in the current Little League Rulebook
 - Coach
 - Pitch
 - Cheer, Root, Yell
 - Instruct

- **How do we do it?**

If the players are having fun, there's no wrong way to organize it. Find an open field on an open day and open it up.

- Organize a single day of the week where fields are opened up.
- Designated an unused field during scheduled league games and activities where children not playing in a game or practice could have an outlet to play.

The goal is not to overburden a local league's volunteers, but rather easily integrate opportunities into our League's schedule and activities.

Keep money out of it. There may be facility fees associated with hosting the LELL Sandlot Fun Day event. The League, though, should try to cover these expenses and not pass this burden onto families, if possible. Remember, these are **unstructured activities**, you need uniforms, umpires, or banners, keep it simple and keep the costs to a minimum.

- **What are the basics?**

Have the players sign-in:

- If the league utilized the Little League group insurance program provided by AIG, these events are covered by this insurance. All we ask is that the league share



the list of players who have participated that are not registered members of the league. Leagues should upload the list of participants through the Data Center within 48 hours after an event. Players must meet age requirements outlined for each division of play and the league must be chartered/insured for the proper number of teams in those divisions.

Follow a few safety standards:

- Batter must wear helmets.
- Catchers (if that position is fielded) must wear appropriate catcher's equipment as outlined in the current Little League Rulebook.
- Pitch counts or inning restrictions must be followed as outlined in the current Little League Rulebook.
- Proper pitching distances must be followed.
- If using bases, they must disengage from their anchor.
- Volunteers should be approved, with a completed volunteer application and background check.

League Name: Lake Elsinore Little League

Team Name: _____

Coach Name: _____

Coach Phone Number: _____

Facility Address: Swick and Matich Park, 402 W. Limited Ave., Lake Elsinore, CA 92530

Date: _____