

2023

STOCKTON EASTERN LITTLE
LEAGUE SAFETY PLAN



LEAGUE ID:

4050803

Welcome to Eastern Little League (ELL). We appreciate you volunteering your time. This year our safety officer is Johnny Jenkins. He is on file with Little League International. If you have any concerns with the safety of the program or the facility or any suggestions on what can be improved he can be reached at email easternsafetyofficer@gmail.com

The purpose of this plan is to provide important information regarding safety to all league officials and volunteers. Our goal is to provide a safe environment for our kids and all our participants of ELL. As a means of promoting awareness throughout our community about our safety; a copy of this plan will be distributed and made available to all league staff and volunteers.

League Data Center: League player, manager and coach registration data will be submitted to little league data center

Managers and coaches: All managers/coaches will be issued a rule book. Managers and coaches are to enforce all rules at practices and games. We have a Managers/Coaches clinic on March 18th, and will be held at Del Mar Park by appointment to ensure social distances, at least one coach from each team is required to attend.

Background checks: all volunteers who may come in contact with players are required to submit a completed 2023 volunteer application to the league president prior to the start of the season. All prospective managers and coaches are to be interviewed by the league president and be summated to the board of directors for approval. The league president will conduct all volunteer background checks via JDP prior to any volunteer coming in contact with the players.

New California law requires all volunteers to also have a fingerprint background check via LIVE SCAN prior to coming in contact with players

First aid: First aid training is scheduled this year on March 18th, and will be held at Del Mar Park by appointment to ensure social distances. All managers and coaches are required to attend. Individuals who attend various outside first aid training and courses are not exempt. Due to their training and education medical doctors, licensed registered nurses, licensed practical nurses and paramedics do not need to attend.

Concussion training: all volunteers are required by Eastern Little League to take the online HEADS UP concussion in youth sports course. This is free and provided by the CDC. After completing the course save your completion certificate and give to safety officer to have on file before the first practice. The website is <https://www.train.org>

Accident reporting: All accidents or incidents need to be reported to the league safety officer within 48hrs. Please use the accident notification form for any incident that causes a volunteer or player to receive medical treatment or first aid must be reported; this includes even passive treatments such as the evaluation and diagnosis of the extent of the injury or periods of rest.

Equipment: All equipment is inspected during the pre-season for safety by the league president, safety officer and equipment manager. The equipment manager will issue all equipment to the managers. The managers will inspect the equipment when it is issued to them for safety. Throughout the year the managers and umpires will inspect all equipment prior to any game or practice. If faulty or unsafe equipment is found during the season the manager will contact the equipment manager for a replacement. The unsafe equipment will be destroyed so it cannot be used and somebody getting hurt.

Storage sheds: The following applies to all storage sheds used by ELL and applies to anyone who has been issued keys to use the sheds.

- All individuals with keys to the sheds should be aware of their responsibilities for the orderly and safe storage of equipment
- Before you use any equipment stored in the sheds be sure you are aware of the proper operating procedures for the equipment
- Check before using equipment check that the equipment is in safe operating condition
- All chemicals and organic materials stored in ELL sheds shall be properly marked and labeled as to its contents
- Any observed “loose” or spilled chemicals or organic materials within the sheds should be cleaned up and properly disposed of as soon as possible to prevent possible poisoning
- ALL STORAGE SHEDS ARE TO BE LOCKED WHEN LEFT UNATTENDED

Safety code:

- Every adult member of Eastern Little League needs to be alert and responsible for the safety of all players
- Team parents are recommended they help keep children under control when managers and coaches are busy with games/practices as well as help notice any unsafe conditions that need to be taken care of.
- Managers/coaches and league staff shall have training in first aid
- First aid kits will be issued to all team managers and snack bars at the start of the season. These kits must be made available at all games and practices
- No games or practices should be held when weather or field conditions are not safe
- Playing fields should be inspected frequently for holes, foreign objects, rocks and broken glass
- Team equipment should not be allowed in the area of the field defined as “in play”.
- Only players, managers, coaches, and umpires are permitted on the playing fields or in the dug outs during games or practices.
- Responsibility for keeping bats and other loose equipment off the field should be other than players, managers, coaches. Team parents are great for this.
- During warm-up drills, players should be spaced so that no one is in danger of wild swings, throws or missed catches.
- Equipment should be inspected regularly for condition and proper fit.

Safety code continued

- Batters must wear little league approved helmets during practice and games
- Catcher must wear catcher's helmet with dangling throat guard during infield/outfield warm-ups, pitcher warm-ups, batting practice, no matter who is hitting the ball per little league rule 1.17(pg.70 green book, pg 66 softball book). Catchers shall wear mask, throat guard, long knee shin guards, chest protector and protective cup at all time with athletic supporter cup for all practices and games.
- No head sliding is permitted
- At no time horse play is allowed
- Managers/coaches are not allowed to warm-up pitcher before or during a game (rule 3.09).
- On deck batters are not permitted (except JR/SR division). Only the first batter of each inning will be permitted outside the dugout between half-innings (rule 1.08)
- Field inspection will be conducted by umpire and both managers to ensure fields are safe to play.
- Medical release forms for each player must be in possession of the coaching staff at all games and practices. Forms must also be with player agent of ELL.
- All managers are required to get or provide some training to coaching staff on how to conduct effective practices and teaching the fundamentals of all aspects of the game
- All volunteers that will have contact with players must fill out a volunteer form. All volunteers are subject to a background check.
- All ELL board of directors, managers, umpires, coaching staff, and volunteers are and will adhere to and enforce the little league rules of play and conduct.
- Snack bar volunteers will use safe food preparation practices, including use of gloves when handling food items, safe food procedures shall be posted in the snack bar.
- Managers and coaches shall provide safety instructions to players.
- No practices or games will be held when weather or fields are determined unsafe for play. Safety first.
- All managers on both sides and umpires must walk fields prior to games to ensure that they are safe for playing (ex. Needles, broken glass, holes and rocks)
- Managers, coaches and umpires are to inspect equipment prior to each game and practices to ensure safety for the players.
- Managers, coaches and volunteers with open wounds should refrain from all direct contact until the condition is resolved.
- All bases on all fields shall disengage from the anchors
- T-ball and farm will use reduced impact balls (saf-t-ball)
- A telephone needs to be available during all games and practices
- Eastern Little League encourages players to use mouth guards and protective cups when playing the infield
- Eastern Little League encourage players to use face guards on batting helmets

COVID-19 GUIDELINES

The goal of this plan is to create as safe an environment as possible for players, coaches, families, volunteers and umpires while they are participating in or experiencing a baseball or softball event at Eastern Little League event. The following recommendations are made using resources from Little League International, the US Centers for Disease Control and Prevention (CDC) and the World Health Organization (WHO). These plans will be reviewed regularly to ensure that at all times, Eastern Little League will follow State of California and local guidelines and regulations regarding group gatherings and youth sports activities.

General Guidelines:

- Families will be asked to take the temperature of all players before leaving home for practices or games
- Any participant with a temperature above 100F should stay home
- Any participant, fan or volunteer with symptoms of COVID-19 will be asked to stay home with symptoms including but not limited to: fever, cough, shortness of breath, loss of smell/taste.
- All players will be asked about these symptoms by coaching staff before commencing each ELL activity
- Individuals at risk of severe illness or with underlying medical and respiratory diseases should attend ELL activities only with specific permission from a medical professional
- Any participant or fan who has been at a ELL event and then test positive for COVID within two weeks should immediately notify the league
- Social Distancing (6 foot distance between people) will be expected whenever possible and when not possible an appropriate face covering will be required
- Hands should be washed frequently for at least 20 seconds or hand sanitizer used as frequently as practical and always after touching common surfaces such as doorknobs, light switches, gate handles or latches.
- Hand sanitizer will be available at all fields during all events in sufficient amounts to supply all players, coaches, volunteers and families. Players will also be encouraged to bring their own hand sanitizer for personal use
- No spitting, eating sunflower seeds or chewing gum will be allowed

On-Field Guidelines:

- Players are encouraged to not show more than 30 minutes before scheduled game/practice time
- Teams will not enter field until previous teams have completely vacated and commonly touched surfaces cleaned by previous event coaches
- No pre-game meeting at home plate with coaches and umpires
- New balls will be used every two innings
- Foul balls will be retrieved by players only not spectators or coaches. If touched by non-player, a coach will disinfect the ball before returning to play
- Measures must be taken to prevent all but the essential contact necessary to play the game. This includes refraining from handshakes, high fives, fist/elbow bumps or group celebrations
- No handshake line at the end of games. Instead players will line up outside dugout and tip hats/hands toward the other team
- High touch surfaces will be cleaned by coaches after each event including dugouts, fences, gate latches, benches and bleachers
- Field must be vacated no later than 20 minutes after the end of each game

Equipment

- Equipment is not to be shared between players
- If any player does not have individual equipment, team equipment will be used and then disinfected after each use
- Player bags will be placed outside the dugout a separate from each other
- Players will bring their own beverages and these drinks will not be shared
- New balls used/introduced every 2 innings

COVID-19 Guidelines continued...

Dugout

- When not on the field, players will be assigned spots outside the dugout each separated by 6 feet. These areas will be marked out and enforced by the coach in the dugout
- Plans are to not use the dugouts at all and in the event that one needs to be used then it will be sanitized after the game is completed by the coach.

Players

- Will be encouraged by coaches at all times to maintain social distance amongst each other
- When social distancing not possible face covering will be worn
- Will be allowed to touch only their own equipment
- If using shared equipment will need to be sure it has been recently disinfected
- Bring, identify and touch only their own beverage
- Do not bring any food, gum or sunflower seeds to events

Coaches

- Minimize numbers of coaches and assistants for games practices
- Maintain communication of expectations, plans and progress with parents
- Screen players with above-listed questions before starting each event
- Persistently monitor and remind players of social distancing precautions/procedures
- Disinfect multi-use items
- Clean/disinfect high touch surfaces before and after games/practices
- Minimize exchange of scorecards and pitch counters

Umpires

- Will have face covering available for when social distancing is not possible
- Plate umpire will call balls and strikes from behind pitchers mound
- Field umpires will keep at least 6 feet distance from each other and players
- Equipment inspection will be visual only

Family Members/Fans Guidelines

- Take players' temperatures before game
- Monitor for and report any signs of illness in participants
- Fans at games will be limited to household members or immediate family of players and no more than two fans per player
- Maintain social distance from all other attendees at all times
- Must watch games from car or own chairs along fences or down foul lines
- Maintain 6 feet distance between families and groups
- Ensure arrival no more than 30 minutes before scheduled start time and exit within 15 minutes of conclusion
- Players' equipment and bags should be cleaned after each use

Restroom Guidelines

- Public restrooms will be locked during all ELL activities
- Key will be available from officer-of-the-day for EMERGENCIES ONLY
- If opened for any reason bathroom will be cleaned and disinfected after each event

Concession Stand

- Currently closed
- Will remain closed unless deemed safe and appropriate by the department of Health
- If opened at any point, concessions will be limited to prepackaged, individual serving containers
- If opened, volunteers running stand will wear PPE at all times

2023 EASTERN LITTLE LEAGUE BOARD MEMBERS

President	Eric Speers	(209) 603-5920
Vice President	Steven Delcorso	(209) 922-4560
Treasurer	Katy House	(209) 408-3862
Safety officer	Johnny Jenkins	(209) 271-1971
Player Agent	Cintia Smith	(209) 623-8875
Secretary		
Fundraising Coordinator		
Equipment Manager		
Field Maintenance		
Baseball Coordinator		
Chief Umpire	David Martinez	(209) 242-3317
Concession Manager		

IMPORTANT PHONE NUMBERS

EMERGENCY	FIRE, POLICE, SHERIFF, CHP AND PARAMEDICS	911
POLICE	NON-EMERGENCY	209-937-8311
SHERIFF	NON-EMERGENCY	209-468-4400
CHP	NON-EMERGENCY	209-943-8600
FIRE	NON-EMERGENCY	209-937-8801
ANIMAL CONTROL	24 HOUR DISPATCH	209-937-8274
POISON CONTROL	NON-EMERGENCY	800-222-1222



Little League® Volunteer Application – 2023

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(G)9. THIS FORM SHOULD NOT BE COMPLETED IF A LEAGUE IS UTILIZING THE JDP QUICKAPP. Visit littleleague.org/local/BJ-check for more information.

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

All RED fields are required.

Name _____ First _____ Middle Name or Initial _____ Last _____ Date _____

Address _____

City _____ State _____ Zip _____

Social Security # (mandatory) _____

Call Phone _____ Business Phone _____

Home Phone _____ E-mail Address: _____

Date of Birth _____

Occupation _____

Employer _____

Address _____

Special professional training, skills, hobbies: _____

Community affiliation (Club, Service Organizations, etc.): _____

Previous volunteer experience (including yourself/retired and year): _____

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

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

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

4. Have you ever been convicted with, convicted of, pled 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 4, the local league must contact the Little League Security Manager.)

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

6. Do you have any criminal charge pending against you regarding any crime(s)? _____ Yes No
(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 based on any youth organization 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, or 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 SENIATE 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/BJ-check

AS A CONDITION OF VOLUNTEERING, I give permission for the Little League organization to conduct background checks on me and as long as I continue to be active with the organization, which may include a review of sex offender register, license of which contains name only searches which may result in a report being generated that may or may not be sex, child abuse and criminal history records. I understand that, if approved, my position is conditional upon the league receiving no derogatory 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 appointment, 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 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(G)(9) for all background check requirements

JDP (includes review of the US, Center of SafeSport's Centralized Disciplinary Database and Little League International Ineligible List)* **OR**

National Criminal Database check U.S. Center of SafeSport's Centralized Disciplinary Database and Little League International Ineligible List

National Sex Offender Registry U.S. Center of SafeSport's Centralized Disciplinary Database and Little League International Ineligible List

*Please be advised that if you use JDP and there is a name match in the law states where only name match 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: 10/11/2021

DANGER
FOUL BALL
AREA



**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 GUARDIAN AUTHORIZATION:

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)/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 problems which may interfere with or alter treatment.

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

FOR LEAGUE USE ONLY:

League Name: _____ League ID: _____
 Division: _____ Team: _____ Date: _____

WARNING: PROTECTIVE EQUIPMENT CANNOT PREVENT ALL INJURIES A PLAYER MIGHT RECEIVE WHILE PARTICIPATING IN BASEBALL/SOFTBALL. Little League does not limit participation in its activities on the basis of disability, race, color, creed, national origin, gender, sexual preference or religious preference.

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

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.

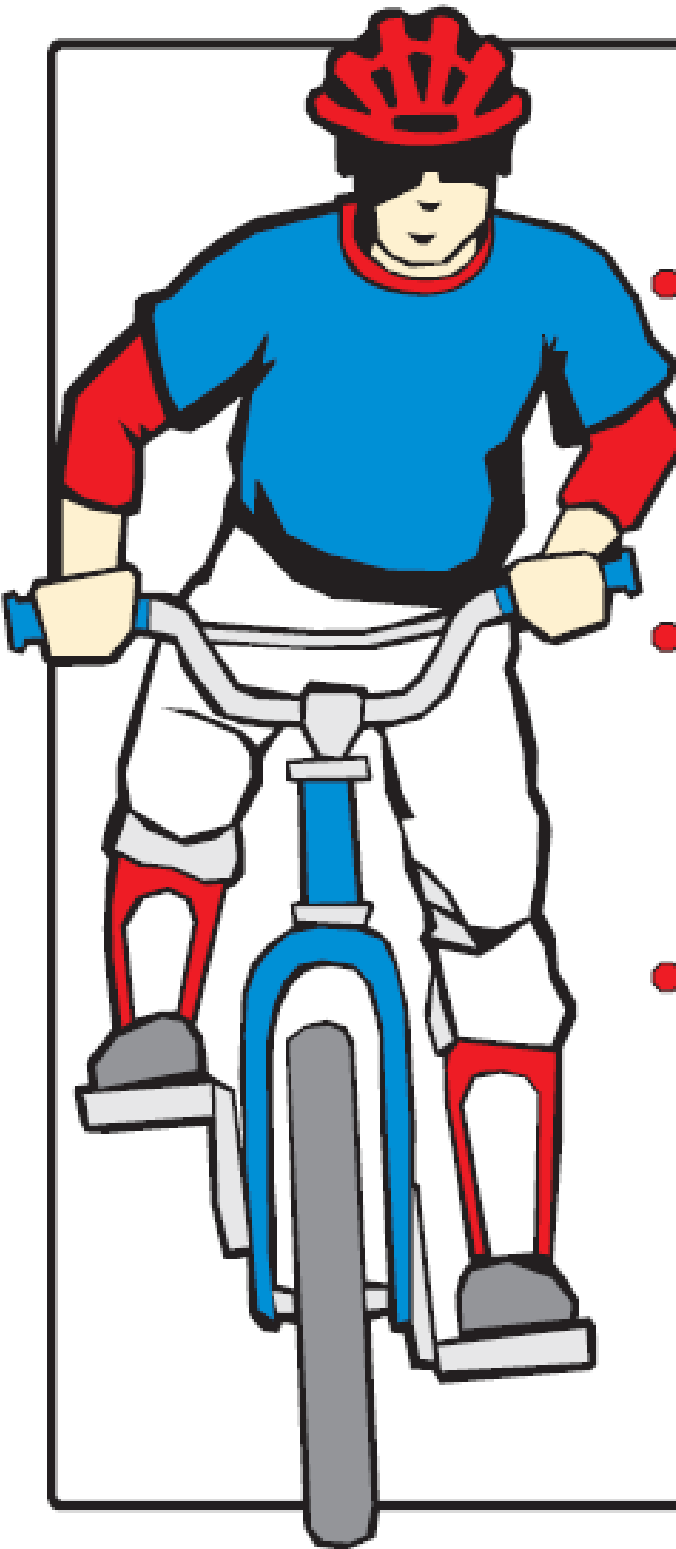
The "Asthma Emergency Signs" above represent general emergency situations as per the National Asthma Education and Prevention Program 1997 Expert Panel Report.

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)



- **Wear your helmet**
- **Watch for cars**
- **Ride with traffic**



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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 stereo 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.

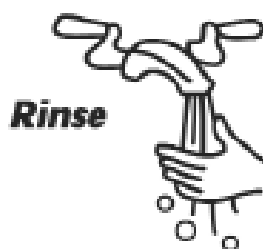
13. Set a Minimum Worker Age.

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 Cooperative, UMass Extension provides equal opportunity in programs and employment.





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

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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

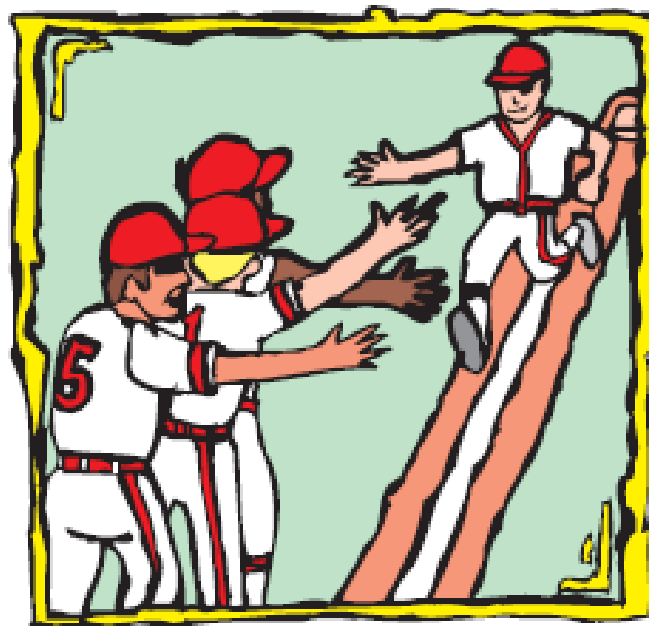
Severe signs: Muscle spasms, clumsiness, delirium



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**

Keep It Clean!



REMEMBER:

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

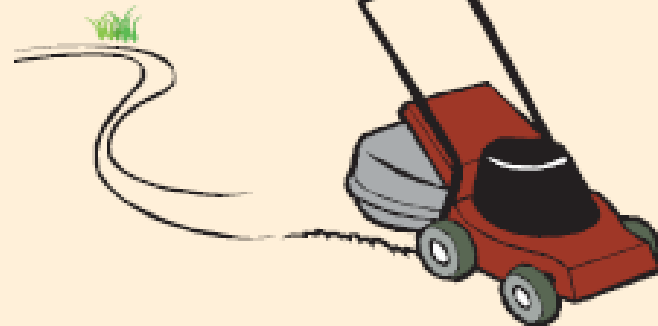
Regulation XIV – Field Decorum

- 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 partial dugouts.



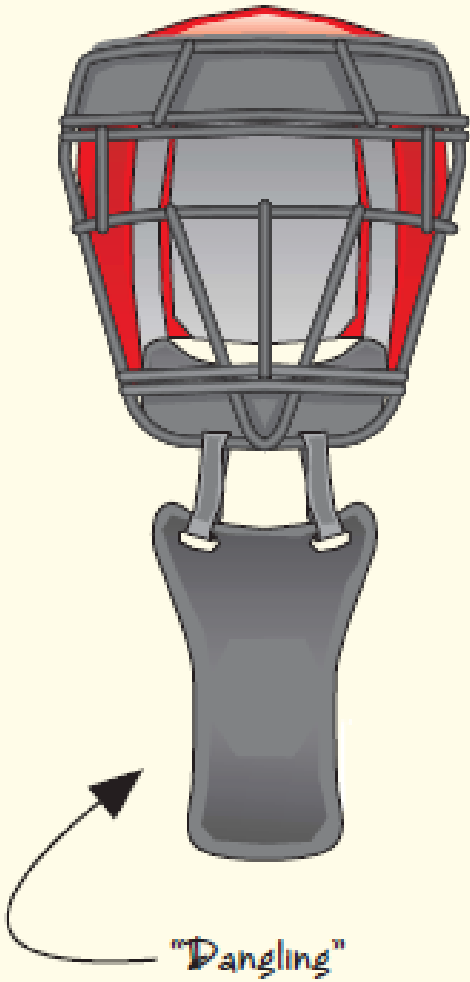
Mower/Equipment Safety Rules



1. Never make adjustments or repairs with the engine running.
2. Be sure the area is clear of other people before mowing. **STOP** if anyone enters the area.
3. Never carry passengers.
4. Do **NOT** mow in reverse.
5. **ALWAYS** look down and behind **BEFORE** and **WHILE** backing.
6. Remove rocks, tree limbs, cans, etc. before mowing.
7. Always check the oil in the mowers before use.
8. **ONLY** adults operate mowers. **NO** children/others allowed to ride along with operator of riding mowers.
9. Please report damage or trouble with the mowers so they can be repaired.
10. You **MUST** wear safety glasses when using weed eater.

 Modified from Peru, Ind., Little League safety plan





**Make
Sure
They
Are
Safe!**

REMEMBER:
Catchers must wear helmets during warm-ups and infield/outfield practice.

RULE 1.17
"...All catchers must wear a mask, 'dangling' type throat protector and catcher's helmet during infield/outfield practice, pitcher warm-up and games."

What to do if someone is struck by lightning

- ▶ **Lightning victims do not carry an electrical charge, are safe to handle, and need immediate medical attention.**
- ▶ **Call for help.** Have someone call 9-1-1 or your local ambulance service. Medical attention is needed as quickly as possible.
- ▶ **Give first aid.** Cardiac arrest is the immediate cause of death in lightning fatalities. However, some deaths can be prevented if the victim receives the proper first aid immediately. Check the victim to see that they are breathing and have a pulse and continue to monitor the victim until help arrives. Begin CPR if necessary.
- ▶ **If possible, move the victim to a safer place.** An active thunderstorm is still dangerous. Don't let the rescuers become victims. Lightning CAN strike the same place twice.



NOAA

STAY INFORMED

Listen to NOAA Weather Radio for the latest forecast and for any severe thunderstorm WATCHES or WARNINGS. Severe thunderstorms produce winds of 58 mph or greater, or hail 3/4 of an inch or larger in diameter.

A severe thunderstorm WATCH is issued when conditions are favorable for severe weather to develop.

A severe thunderstorm WARNING is issued when severe weather is imminent. National Weather Service personnel use information from weather radar, satellite, lightning detection, spotters, and other sources to issue these warnings.



NOAA WEATHER RADIO IS THE BEST WAY TO RECEIVE FORECASTS AND WARNINGS FROM THE NATIONAL WEATHER SERVICE.

Remember that all thunderstorms produce lightning and all lightning can be deadly to those outside.

Lightning Safety Awareness Week is the last full week of June. For additional information on lightning or lightning safety, visit NOAA's lightning safety web site:

<http://www.lightningsafety.noaa.gov>

or contact us at

National Weather Service
P.O. Box 1208
Gray, Maine 04039

GYX 0301 (August 2003) - Revised

Coach's and Sports Official's Guide to Lightning Safety...



NOAA

LIGHTNING... the underrated killer!

A SAFETY GUIDE

U.S. DEPARTMENT OF COMMERCE
NATIONAL OCEANIC AND ATMOSPHERIC ADMINISTRATION

NATIONAL WEATHER SERVICE

Gray, Maine



This safety guide has been prepared to help coaches and sports officials recognize the dangers of lightning and take appropriate safety precautions.

LIGHTNING KILLS Play It Safe!

Each year in the United States, more than four hundred people are struck by lightning. On average, about 70 people are killed and many others suffer permanent neurological disabilities. Most of these tragedies can be avoided if proper precautions are taken. When thunderstorms threaten, coaches and sports officials must not let the desire to start or complete an athletic activity hinder their judgment when the safety of participants and spectators is in jeopardy.

It is important for coaches and officials to know some basic facts about lightning and its dangers

- ▶ **All thunderstorms produce lightning and are dangerous.** In an average year, lightning kills more people in the U.S. than either tornadoes or hurricanes.
- ▶ **Lightning often strikes outside the area of heavy rain and may strike as far as 10 miles from any rainfall.** Many deaths from lightning occur ahead of storms because people wait too long before seeking shelter, or after storms because people return outside too soon.
- ▶ **If you hear thunder, you are in danger.** Anytime thunder is heard, the thunderstorm is close enough to pose an immediate lightning threat to your location.
- ▶ **Lightning leaves many victims with permanent disabilities.** While only a small percentage of lightning strike victims die, many survivors must learn to live with very serious, life-long disabilities.

To avoid exposing athletes and spectators to the risk of lightning take the following precautions

- ▶ **Postpone activities if thunderstorms are imminent.** Prior to an event, check the latest forecast and, when necessary, postpone activities early to avoid being caught in a dangerous situation. Stormy weather can endanger the lives of participants, staff, and spectators.
- ▶ **Plan ahead.** Have a lightning safety plan. Know where people will go for safety, and know how much time it will take for them to get there. Have specific guidelines for suspending the event or activity so that everyone has time to reach safety before the threat becomes significant. Follow the plan without exception.
- ▶ **Keep an eye on the sky.** Pay attention to weather clues that may warn of imminent danger. Look for darkening skies, flashes of lightning, or increasing wind, which may be signs of an approaching thunderstorm.
- ▶ **Listen for thunder.** If you hear thunder, immediately suspend your event and instruct everyone to get to a safe place. Substantial buildings provide the best protection. Once inside, stay off corded phones, and stay away from any wiring or plumbing. Avoid sheds, small or open shelters, dugouts, bleachers, or grandstands. If a sturdy building is not nearby, a hard-topped metal vehicle with the windows closed will offer good protection, but avoid touching any metal.

- ▶ **Avoid open areas.** Stay away from trees, towers, and utility poles. Lightning tends to strike the taller objects.
- ▶ **Stay away from metal bleachers, backstops and fences.** Lightning can travel long distances through metal.
- ▶ **Do not resume activities until 30 minutes after the last thunder was heard.**
- ▶ **As a further safety measure, officials at outdoor events may want to have a tone-alert NOAA Weather Radio.** The radio will allow you to monitor any short-term forecasts for changing weather conditions, and the tone-alert feature can automatically alert you in case a severe thunderstorm watch or warning is issued. To find your nearest NOAA weather radio transmitter, go to <http://www.nws.noaa.gov/nwr/> and click on "Station Listing and Coverage."

If you feel your hair stand on end (indicating lightning is about to strike)

- ▶ **Crouch down on the balls of your feet, put your hands over your ears, and bend your head down.** Make yourself as small a target as possible and minimize your contact with the ground.
- ▶ **Do not lie flat on the ground.**



NOAA



**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

Accident & Health (U.S.)

1. 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.
2. 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.
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 Headquarters, 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 incurred after 52 weeks. Refer to insurance brochure provided to the league president, or contact Little League Headquarters within the year of injury.
6. 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	DATE OF BIRTH (MM/DD/YY)	Age
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	Type of Injury
	<input type="checkbox"/> AM <input type="checkbox"/> PM	

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"/> SPECIAL GAME(S)
<input type="checkbox"/> CHALLENGER	<input type="checkbox"/> MINOR (8-12)	<input type="checkbox"/> VOLUNTEER UMPIRE	<input type="checkbox"/> SCHEDULED GAME	(Submit a copy of your approval from Little League Incorporated)
<input type="checkbox"/> TAD (2ND SEASON)	<input type="checkbox"/> LITTLE LEAGUE (9-12)	<input type="checkbox"/> PLAYER AGENT	<input type="checkbox"/> TRAVEL TO	
	<input type="checkbox"/> INTERMEDIATE (59/70) (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 (13-18)	<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
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