

**Little League® International Tournament**  
**STATE WINNER'S PACKET**



**Tuesday, July 23 – Friday, July 26**

***1280 Melrose St.  
Pineville, Louisiana 71360***



June 2024

Welcome to the Little League® Senior Softball - Southwest Regional Tournament!

We know that the road to the Little League® Senior Softball - Southwest Regional Tournament has been exciting and that you have put in an extraordinary number of hours of dedication to the game. For this, we say thank you and that we are proud that you have chosen to participate in Little League® and all the ideals of this great organization.

As you continue in the Little League® International Tournament in the opportunity to advance to the 2024 Senior League Softball World Series, we want to encourage you to continue to interact with each other as well as the wonderful volunteers that have spent so much time to make this Southwest Regional Tournament a success. This is a unique opportunity for you to engage with other individuals from locations near and far and of different backgrounds. A chance to create life long memories and friendships. To experience a once in a lifetime opportunity with friends, family, and loved ones during this - the eternal days of summer.

Please be sure that you take advantage of all the experiences that this great tournament offers to you. We are grateful to the community of Pineville, Louisiana for embracing this wonderful event and opening its arms to receive all the teams, families, and spectators. Little League® is an organization that embodies the discipline of teamwork and we can think of no greater example of that teamwork in action than the communities that host these great regional tournaments.

Lastly, just have fun.

Good luck in the tournament!

Blaine Whitmire  
Southwest Regional Director



**From the desk of *Michael O. Marler***  
**LITTLE LEAGUE BASEBALL® INCORPORATED**  
*District Administrator Louisiana 3*



Dear Manager:

Congratulations!

You are now a Little League® State Champion and have earned your ticket for the next stage, the Southwestern Regional Tournament. There is only one more step before arriving to the Senior League Softball World Series®.

As you prepare for this new great adventure, please be careful to read all of the instructions on this winner's informational packet and to send us the basic documents right away. We have a true appreciation for your volunteer work and dedication to our program. Your diligence with this paperwork will ensure a smooth and fun event.

Be ready to encounter a great group of volunteers like yourself who value this great opportunity to teach our players great life lessons applied throughout anyone's lifetime. They work really hard to put together a great tournament and to be the best hosts possible for your team and families.

Please encourage your players and respective parents to make new friends along the way. This will be a unique opportunity to interact with other volunteers, umpires, league officials and other Little League® enthusiasts from across the region.

We can't wait to see you here, meet your team and watch them play. Meanwhile, give this document a close look, jot down all the things pending, and let us know how we can assist you in getting everything set up.

Best of luck!

Respectfully,

A handwritten signature in black ink that reads "Michael O. Marler".

Michael O. Marler  
District Administrator  
Louisiana District 3 Little League®  
Little League® International



July 25, 2019

Dear Little League Board Members:

On behalf of the Alexandria/Pineville Area Convention and Visitors Bureau, we extend a warm "Welcome" to all participants of the Senior League Southwestern Softball Regional.

The Alexandria/Pineville area is located in the middle of Louisiana, offering ease of travel from anywhere in the state. Our area offers an excellent price value, with a wide array of accommodations. We are very pleased to host this event, and we will go the extra mile to make it a success!

Additionally, a spirit of hospitality lies within the people of Central Louisiana. We welcome the many visitors who pass through our area and would most certainly be happy to welcome the families and fans associated with the World Series.

We look forward to working with you. Should you have any questions, please do not hesitate to contact us.

Sincerely,

A handwritten signature in blue ink, appearing to read "Sherry Ellington".

Sherry Ellington  
Executive Director

A handwritten signature in blue ink, appearing to read "Samuel Dangerfield III".

Samuel Dangerfield III  
Sports Sales

707 Second Street | Alexandria, LA 71301

Local: [\(318\)442-9546](tel:3184429546) | TollFree: [\(800\)551-9546](tel:8005519546) | Fax: [\(318\)443-1617](tel:3184431617)

[inquire@apacvb.org](mailto:inquire@apacvb.org) | [AlexandriaPinevilleLA.com](http://AlexandriaPinevilleLA.com) | [facebook.com/AlexandriaPinevilleCVB](https://facebook.com/AlexandriaPinevilleCVB) | [@apacvb](https://twitter.com/apacvb)



# Congratulations, State Champion!

Before you arrive in Pineville, we need some information about your team. Please contact Michael Marler immediately at (318) 541-1990 so that we may gather this information and make final preparations for your team's arrival.

## ***INFORMATION WE NEED***

**Contact Michael Marler immediately at (318) 541-1990**  
**Upload the following** to your assigned "Drive" on Google. The  
Tournament Director will email the link to you.

1. Copy of team affidavit
2. Copy of map with plotted players
3. Full roster of team with numbers and positions (see page 6)
4. Team Song – The team song will be played while your team is being introduced before every game. If you have the mp3 file of the song please upload it.

### **Little League® Southwest Region**

George W. Bush Little League® Leadership Training Center  
3700 S. University Parks Drive  
Waco, TX 76706  
Phone: (254) 756-1816  
Fax: (254) 757-0519



# TEAM CHECK-IN - July 23, 2024

*T.B.D.*

*Pineville, Louisiana 71360*

## Required items to bring to check-in

- Team affidavit and Pitching Record (including league map, each player's Tournament Verification Form and proofs of residency/school enrollment, and any waivers – DO NOT bring birth certificates)
- Little League® Medical Release form for each player (see page 8)
- Little League® Form Release and Waiver form for each person listed on the affidavit (see page 7)
- Concussion Awareness Training certificates- Manager and Coaches (see page 9-11)
- Little League Baseball Regional Tournament Agreement - Managers (see page 12-13)

## FACILITY POLICIES

- The use of alcohol and/or tobacco products are strictly forbidden on Louisiana College property.
- Possession or use of these products will result in removal from the property.
- The use of e-cigarettes and/or vapors is strictly forbidden on Louisiana Little League property.
- No firearms or weapons of any kind are allowed on property.
- Pets are not allowed on Louisiana College property (the use of service animals is permitted).
- **No outside coolers, drinks, or food may be brought on site.**
- Noisemakers such as bells, whistles, horns, vuvuzelas, etc are not permitted.

## **MANAGER'S MEETING**

**Zoom – 2:00 PM - Monday, July 22nd**

**MANDATORY: All managers and one coach are required to be present. All policies, schedules, ground rules, tournament format, practice schedules, and many other topics will be discussed.**

## **ADMISSION FEE**

An Admission Fee will be charged daily for those who have not been issued a Tournament Pass from the Tournament Staff.

The Admission Fee will be \$10 per person and 12 year old and younger will be FREE.

The Admission Fee helps offset some of the cost associated with putting on this event.

## **BROADCASTS**

Radio broadcast of games during the tournament are available to leagues wishing to broadcast games in their hometowns. A broadcast fee of \$100 per game is required for each radio broadcast.

For any questions regarding radio broadcasts, please contact:  
Michael Marler @ lad3da300@yahoo.com

## Hotel Information

- We ask that your team and parents book rooms in Pineville, La. since the City of Pineville is a big supporter of this tournament.
- All hotels in Pineville are all within 10 min. of each other and Louisiana College.
- Available Hotels in Pineville, Louisiana

### 1) Holiday Inn Express & Suites

2820 Monroe Hwy, Pineville, LA 71360

(318) 704-6700

### 2) Sleep Inn & Suites

3411 US Hwy. 165, Pineville, LA 71360

(318) 290-3735

### 3) Country Inn & Suites

2727 Highway 165, Pineville, LA 71360

(318) 641-8332

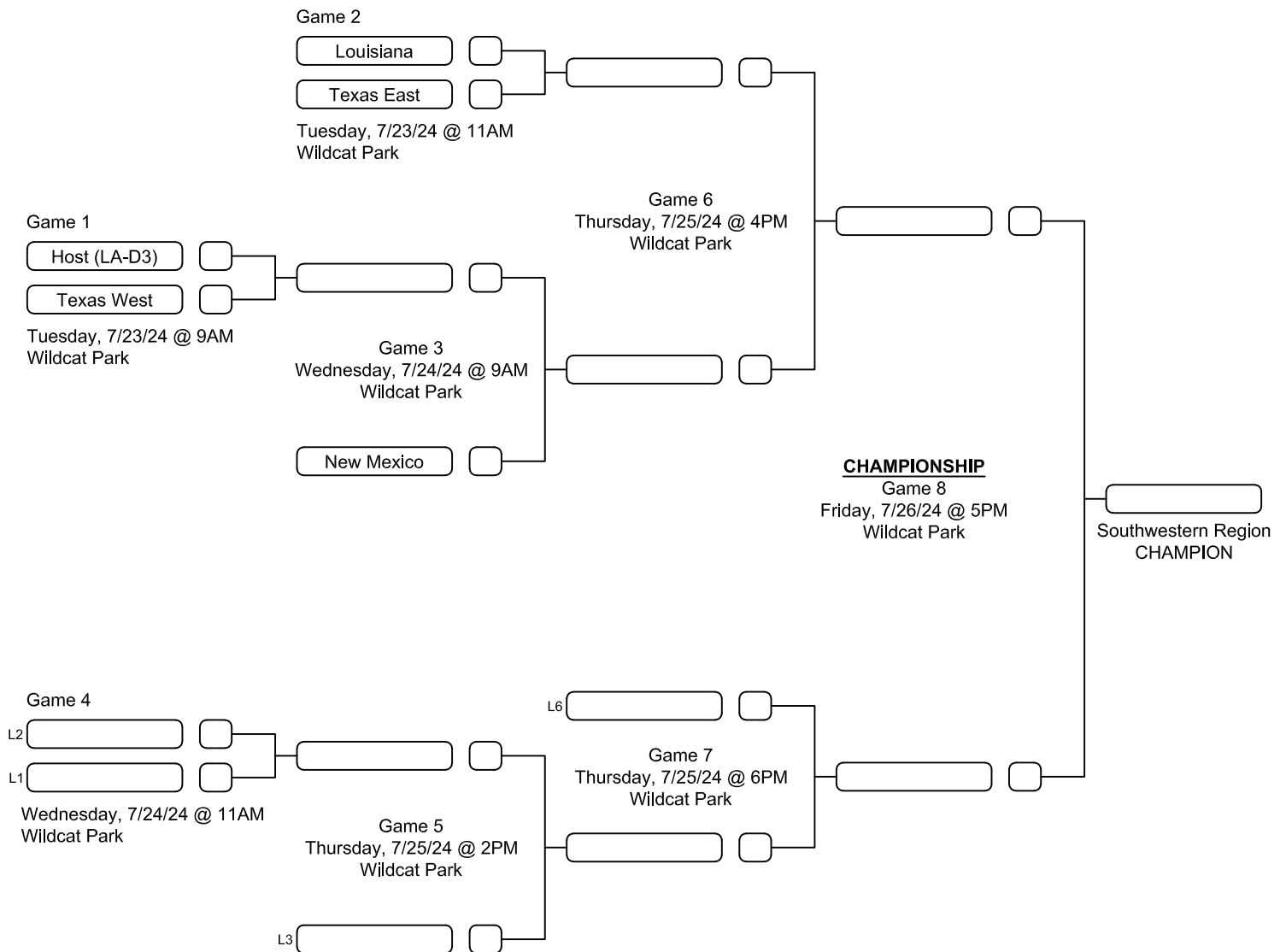


## Restaurant Information

Name	Address	City
As the Crow Flies Coffee and Tea	3770 Monroe Highway, Suite M	Pineville
BJ's Pizza (Ball)	6301 Highway 165 South	Ball
BJ's Pizza (Pineville)	540 Stilley Road	Pineville
Buckets Crawfish and Seafood	117 Mary Hill Road	Pineville
CC's Coffee House (Pineville)	2481 Highway 28 East	Pineville
China Queen	2981 Cottingham Expressway	Pineville
Darrell's Restaurant (Tioga)	4632 Shreveport Highway	Pineville
Genghis Mongolian Grill	2977 Highway 28 East	Pineville
Harlow's Donut & Bakery	1322 Military Highway	Pineville
Jerusalem Greek & Lebanese Café	3770 Monroe Highway	Pineville
Los Portalos	3628 Monroe Highway, Suite 148	Pineville
Outlaw's BBQ (Pineville)	359 Kings Country Road	Pineville
Paradise Catfish Kitchen	4820 Monroe Highway	Pineville
Southern Creations	208 Main Street	Pineville
Tastea House	2640 Highway 28 East	Pineville
The Batter's Box	5010 Shreveport Highway	Pineville
Yucatan Mexican Restaurant	200 Sandifer Lane	Pineville



Senior League  
**SOUTHWEST REGION**  
 PINEVILLE, LA  
**SOFTBALL**  
 2024



**NOTICE!**  
 This schedule is subject to Change!  
 The Number of teams determine the final schedule.

# 2024 Senior League Softball Southwest Regional Tournament

## TEAM ROSTER

**STATE** \_\_\_\_\_ **LEAGUE** \_\_\_\_\_

**NOTE:** Please Type or Print neatly! So that we will have the correct spelling and pronunciation of each player and coach.

NAME (First Last; A-Z by last name)		PRONUNCIATION	#	POS.	BATS	THROWS
ex.	<i>Christian Yelich</i>	<i>YELL-itch</i>	22	OF	L	R
1.						
2.						
3.						
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## Little League Baseball®, Incorporated 2019 Form Release and Waiver

### ALL PLAYERS AND PARTICIPANTS UNDER 18

This section to be completed by the parent or guardian of a minor, if minor is under the age of 18 years

I, \_\_\_\_\_  
(Full Name of Parent or Guardian)

of \_\_\_\_\_  
(Address, City, State and Zip Code)

the  Parent  Guardian of \_\_\_\_\_

\_\_\_\_\_  
(E-mail)

\_\_\_\_\_  
(Phone)

hereby irrevocably consent, grant, license and give my permission to Little League Baseball, Incorporated (hereafter "LLB"), its affiliates, successors, and assigns (and their employees, officers, directors and agents or contractors), and any third party which LLB determines in its sole discretion to be appropriate including, but not limited to, ESPN entities, Major League Baseball and their affiliated entities, and any and all sponsors and/or licensees of LLB a royalty free, irrevocable right and license, to use, exploit, adapt, modify, sell, sublicense, reproduce, record, photograph, digitize, distribute, publicly display, publicly perform, and create derivative works, throughout the world in any and all forms whether now known or later developed, the image, name, voice, likeness or persona of the above listed minor in any and all commercial exploits or ventures, promotional materials or announcements, publications, media releases, or advertisements, electronic or otherwise in any medium now known or hereafter developed ("Work(s)"), in perpetuity throughout the universe, and waive any and all rights to the same. I acknowledge and agree that neither the above listed minor nor I will receive any compensation whatsoever if such image, name, voice, likeness or persona appears in any Works, or from any proceeds of any utilized Work. I acknowledge and agree that any use of such image, name, voice, likeness, persona, or resulting Work is solely the property of LLB in perpetuity. In addition, I acknowledge and agree that LLB may, without my permission or advance notice to me, supply such image, name, personal information, voice, likeness, persona or resulting Work to any third party which LLB determines in its sole discretion to be appropriate, for any use, publication, and/or offer of information, programs, and/or services to you or anyone else.

\_\_\_\_\_  
(Signature of Parent or Guardian)

\_\_\_\_\_  
(Date)

### ALL PARTICIPANTS AND ADULTS OVER 18

This section to be completed by an individual participant over the age of 18 years (e.g. coaches, umpires)

I, \_\_\_\_\_  
(Full Name of Participant)

of \_\_\_\_\_  
(Address, City, State and Zip Code)

\_\_\_\_\_  
(E-mail)

\_\_\_\_\_  
(Phone)

hereby irrevocably consent, grant, license and give my permission to Little League Baseball, Incorporated (hereafter "LLB"), its affiliates, successors, and assigns (and their employees, officers, directors and agents or contractors), and any third party which LLB determines in its sole discretion to be appropriate including, but not limited to, ESPN entities, Major League Baseball and their affiliated entities, and any and all sponsors and/or licensees of LLB a royalty free, irrevocable right and license, to use, exploit, adapt, modify, sell, sublicense, reproduce, record, photograph, digitize, distribute, publicly display, publicly perform, and create derivative works, throughout the world in any and all forms whether now known or later developed, my image, name, voice, likeness or persona in any and all commercial exploits or ventures, promotional materials or announcements, publications, media releases, or advertisements, electronic or otherwise in any medium now known or hereafter developed ("Work(s)"), in perpetuity throughout the universe, and waive any and all rights to the same. I acknowledge and agree that I will not receive any compensation whatsoever if my image, name, voice, or likeness appears in any Works, or from any proceeds of any utilized Work. I acknowledge and agree that any use of my image, name, voice, likeness, persona, or resulting Work is solely the property of LLB in perpetuity. In addition, I acknowledge and agree that LLB may, without my permission or advance notice to me, supply my image, name, personal information, voice, likeness, persona or resulting Work to any third party which LLB determines in its sole discretion to be appropriate, for any use, publication, and/or offer of information, programs, and/or services to you or anyone else.

\_\_\_\_\_  
(Participant Signature)

\_\_\_\_\_  
(Date)

To view Little League's privacy and security policies, please visit [LittleLeague.org/PolicyStatements](http://LittleLeague.org/PolicyStatements). If at anytime, an individual would like to opt out, verify, or have data removed, please email [marketing@LittleLeague.org](mailto:marketing@LittleLeague.org).

OFFICE USE

Jersey # \_\_\_\_\_ Team: \_\_\_\_\_

Event: \_\_\_\_\_



# Little League® Baseball and Softball M E D I C A L R E L E A S E



**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: \_\_\_\_\_



## **Louisiana Concussion Protocol**

Louisiana law requires that:

- All participating coaches, officials, volunteers, youth athletes (under 19) and parents/guardians to be provided a Concussion Information Sheet (links found above and PDFs available too), which is required to be signed by the athlete and parent at the beginning of each athletic season or any participation in youth athletic activities
- Also, require all managers/coaches to go through concussion awareness/recognition training; <https://www.cdc.gov/headsup/youthsports/training/index.html>
- Any youth athlete suspected of sustaining a concussion must be immediately removed from the activity by a coach who is required to complete concussion recognition training and they may not return to the activity until cleared in writing by a health care professional for full or graduated return to play. A coach is required to notify a youth athlete's parent/guardian of a suspected concussion.
  
- All coaches, players and umpires will be required to submit their Concussion Information Sheet prior to an ID Badge being issued.
  
- Manager and Coaches must also present a copy of their Concussion Awareness/Recognition certificate prior to their ID Badge being issued.

# CONCUSSION Information Sheet



This sheet has information to help protect your children or teens from concussion or other serious brain injury. Use this information at your children's or teens' games and practices to learn how to spot a concussion and what to do if a concussion occurs.

## What Is a Concussion?

A concussion is a type of traumatic brain injury—or TBI—caused by a bump, blow, or jolt to the head or by a hit to the body that causes the head and brain to move quickly back and forth. This fast movement can cause the brain to bounce around or twist in the skull, creating chemical changes in the brain and sometimes stretching and damaging the brain cells.

## How Can I Help Keep My Children or Teens Safe?

Sports are a great way for children and teens to stay healthy and can help them do well in school. To help lower your children's or teens' chances of getting a concussion or other serious brain injury, you should:

- Help create a culture of safety for the team.
  - › Work with their coach to teach ways to lower the chances of getting a concussion.
  - › Talk with your children or teens about concussion and ask if they have concerns about reporting a concussion. Talk with them about their concerns; emphasize the importance of reporting concussions and taking time to recover from one.
  - › Ensure that they follow their coach's rules for safety and the rules of the sport.
  - › Tell your children or teens that you expect them to practice good sportsmanship at all times.
- When appropriate for the sport or activity, teach your children or teens that they must wear a helmet to lower the chances of the most serious types of brain or head injury. However, there is no "concussion-proof" helmet. So, even with a helmet, it is important for children and teens to avoid hits to the head.



**Plan ahead.** What do you want your child or teen to know about concussion?

## How Can I Spot a Possible Concussion?

Children and teens who show or report one or more of the signs and symptoms listed below—or simply say they just "don't feel right" after a bump, blow, or jolt to the head or body—may have a concussion or other serious brain injury.

### Signs Observed by Parents or Coaches

- Appears dazed or stunned.
- Forgets an instruction, is confused about an assignment or position, or is unsure of the game, score, or opponent.
- Moves clumsily.
- Answers questions slowly.
- Loses consciousness (*even briefly*).
- Shows mood, behavior, or personality changes.
- Can't recall events *prior to* or *after* a hit or fall.

### Symptoms Reported by Children and Teens

- Headache or "pressure" in head.
- Nausea or vomiting.
- Balance problems or dizziness, or double or blurry vision.
- Bothered by light or noise.
- Feeling sluggish, hazy, foggy, or groggy.
- Confusion, or concentration or memory problems.
- Just not "feeling right," or "feeling down."

**Talk with your children and teens about concussion.** Tell them to report their concussion symptoms to you and their coach right away. Some children and teens think concussions aren't serious or worry that if they report a concussion they will lose their position on the team or look weak. Be sure to remind them that *it's better to miss one game than the whole season.*

To learn more, go to [www.cdc.gov/HEADSUP](http://www.cdc.gov/HEADSUP)



**Concussions affect each child and teen differently.** While most children and teens with a concussion feel better within a couple of weeks, some will have symptoms for months or longer. Talk with your children's or teens' health care provider if their concussion symptoms do not go away or if they get worse after they return to their regular activities.



## What Are Some More Serious Danger Signs to Look Out For?

In rare cases, a dangerous collection of blood (hematoma) may form on the brain after a bump, blow, or jolt to the head or body and can squeeze the brain against the skull. Call 9-1-1 or take your child or teen to the emergency department right away if, after a bump, blow, or jolt to the head or body, he or she has one or more of these danger signs:

- One pupil larger than the other.
- Drowsiness or inability to wake up.
- A headache that gets worse and does not go away.
- Slurred speech, weakness, numbness, or decreased coordination.
- Repeated vomiting or nausea, convulsions or seizures (shaking or twitching).
- Unusual behavior, increased confusion, restlessness, or agitation.
- Loss of consciousness (passed out/knocked out). Even a brief loss of consciousness should be taken seriously.

Children and teens who continue to play while having concussion symptoms or who return to play too soon—while the brain is still healing—have a greater chance of getting another concussion. A repeat concussion that occurs while the brain is still healing from the first injury can be very serious and can affect a child or teen for a lifetime. It can even be fatal.

Revised 5/2015

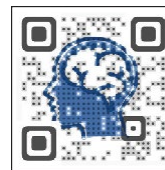
## What Should I Do If My Child or Teen Has a Possible Concussion?

As a parent, if you think your child or teen may have a concussion, you should:

1. Remove your child or teen from play.
2. Keep your child or teen out of play the day of the injury. Your child or teen should be seen by a health care provider and only return to play with permission from a health care provider who is experienced in evaluating for concussion.
3. Ask your child's or teen's health care provider for written instructions on helping your child or teen return to school. You can give the instructions to your child's or teen's school nurse and teacher(s) and return-to-play instructions to the coach and/or athletic trainer.

Do not try to judge the severity of the injury yourself. Only a health care provider should assess a child or teen for a possible concussion. Concussion signs and symptoms often show up soon after the injury. But you may not know how serious the concussion is at first, and some symptoms may not show up for hours or days.

The brain needs time to heal after a concussion. A child's or teen's return to school and sports should be a gradual process that is carefully managed and monitored by a health care provider.



To learn more, go to [www.cdc.gov/HEADSUP](http://www.cdc.gov/HEADSUP)

You can also download the CDC *HEADS UP* app to get concussion information at your fingertips. Just scan the QR code pictured at left with your smartphone.

**Discuss the risks of concussion and other serious brain injury with your child or teen and have each person sign below.**

*Detach the section below and keep this information sheet to use at your children's or teens' games and practices to help protect them from concussion or other serious brain injury.*

I learned about concussion and talked with my parent or coach about what to do if I have a concussion or other serious brain injury.

Athlete Name Printed: \_\_\_\_\_ Date: \_\_\_\_\_

Athlete Signature: \_\_\_\_\_

I have read this fact sheet for parents on concussion with my child or teen and talked about what to do if they have a concussion or other serious brain injury.

Parent or Legal Guardian Name Printed: \_\_\_\_\_ Date: \_\_\_\_\_

Parent or Legal Guardian Signature: \_\_\_\_\_



## Little League Baseball® Regional Tournament Agreement - Managers

(Read carefully and then sign below on behalf of your team.)

- I have my Tournament Eligibility Affidavit in my possession. All games played by my team, and all pitchers who were used in each of those games, are listed on my Tournament Eligibility Affidavit.
- I agree that all players have provided acceptable birth records used to verify the true dates of birth of the players on the affidavit. If records were not available for a player or players, then a Statement in Lieu of Acceptable Birth Documentation, plus copies of all supporting documents, accompany the affidavit.
- My Tournament Eligibility Affidavit is accompanied by copies (or originals) of school enrollment documentation (dated prior to October 1, 2017) or one or more documents, containing the full residence, from each of the three groups (dated prior to February 1 of the current year) to verify the residence of the parent(s) or legal guardian of the players on the affidavit. If any such residence is outside the boundaries of my local league (as noted on the map referenced below), then I have attached documentation showing that the player referenced is eligible to play under Regulation II (d) or Regulation IV (h), or by written permission from the Charter Committee of Little League International, and that these documents are true and correct. If these required items pertaining to each player do not accompany the affidavit, then I understand and agree that the player in question is not eligible.
- My Tournament Eligibility Affidavit is accompanied by a map generated from the Little League® Data Center Affidavit system showing the actual boundaries of my local Little League. Also shown on the map are the actual residences (as defined by Little League Baseball, Incorporated) of or the actual physical location of schools attended by the players listed on the affidavit. If such residences are outside the boundaries, and the player does not attend a school physically located within the boundaries, then the affidavit is accompanied by an approved, written waiver from Little League International, or the Regional Headquarters, for the current season. If these required items pertaining to each player do not accompany the affidavit, then I understand and agree that the player in question is not eligible.
- I agree that neither myself, nor any members of my team or coaching staff will accept any gifts, equipment, awards, or other promotional items of any kind from any source, without explicit written approval from Little League International, from this point forward. I understand that if I, or any members of my team or my coaching staff receive such items, Little League will withhold such items until the end of the event, after which a determination will be made as to their disposal. I also understand that such gifts, awards, or equipment, if accepted, may endanger the amateur status, as detailed in the Little League Baseball Rulebook, of the players on my team and the eligibility of my team to continue participating in the Little League International Tournament. Little League may facilitate the distribution of certain equipment or other items for your team. Any items received are not to be re-sold under any circumstances.
- I understand that Little League Baseball, Incorporated is the owner of trademarks that include the words *Little League®* and *Little League Baseball®*, and that I do not, nor does my team or league, have the authorization to permit those trademarks to be used by others in any fashion including endorsement, promotion, or other commercially-driven initiatives. I will educate my league, its board members, parents, and other volunteers to follow the specific Operating Policies in the Little League Rulebook and any additional guidelines provided during the tournament in regards to fundraising and commercially-related activities, during and after the tournament.
- I certify that our league has not supported, in any way, the participation of this team or players on this team, in another youth baseball or softball program during the 2018 Little League year.
- I understand I may lodge a protest in accordance with the Tournament Rules and Guidelines, and that my team is not required to continue playing until such protest has been resolved, (A) to my satisfaction, or, (B) by the Tournament Committee in Williamsport, Pennsylvania, the decision of which shall be final and binding; I am solely responsible for the behavior of my team, my coaches, and myself. If I, my coaching staff, or members of my team act or play on the field in a manner that gives rise for a tournament director or the Little League International Tournament Committee to interpret our effort, or our performance is not

consistent with fair play, they will have the ability to discipline my team with sole discretion and their decisions will be final and binding.

- I have distributed and collected Little League Medical Release forms for each player listed on my Tournament Eligibility Affidavit in my possession.
- I have distributed and collected completed (including the signature of the parent or legal guardian) model release forms for all players, manager, and coaches and agree to deliver to Little League personnel upon our arrival at the Regional Office.
- I agree that neither myself, nor members of my coaching staff, have accepted compensation, personal or otherwise, for promoting the use of a product or service. We have not violated Little League Regulation XIII(d), and we will continue to comply with the regulation while competing in the Little League International Tournament.
- I have read and I understand the information supplied by the Regional Office including the tournament format.
- I am aware of and I understand the dress code policy regarding the wearing of appropriate attire during games of the Regional Tournament. I am aware of and I understand the policy regarding wearing “Khaki-style” pants or shorts as well as the coaching staff shirt, if the Region provides such.
- I have completed and submitted all team information as required by the Regional Office.
- I understand that no alcoholic beverages, tobacco products, cigarettes (including e-cigarettes and vapors), illegal drugs, or controlled substances are permitted in the housing premises provided by Little League. I understand that violation of this rule will be cause for immediate disciplinary action.
- I acknowledge that appearance is a solid attribute to good coaching. A well-groomed manager/coach creates an atmosphere of respect and dignity. I agree that our coaching staff will dress neatly and be in appropriate attire. I understand that I am permitted to wear normal jewelry such as rings, watches, and earrings. Excessive jewelry is prohibited.
- I agree that all players and coaches using social media during the tournament will limit the use and only use it to express positive messages about the team. Additionally, we understand it is not to be used to display negative messages toward players, coaches, managers, volunteers (including umpires), the tournament, or Little League International, and that complaints should be voiced through appropriate channels. Lastly, our social media accounts may be monitored for any inappropriate activity, and may be subject to review of Little League International Tournament Committee, which may lead to disciplinary action.

My signature below signifies that I have read, understand, accept, and agree to all of the terms and ongoing obligations set forth in this document.

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League Name

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Manager Signature

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Date

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League President Signature

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Date