

2025 LOU GEHRIG LITTLE LEAGUE SAFETY PLAN



KEEPING OUR LEAGUE SAFE

*Lou Gehrig Little League, Inc. has secured a board approved Safety Officer using a proper voting election process. John Connolly is listed as the Safety Officer. John is on file with Little League International and listed in the Data Center. The Safety Officer is a member of the Little League Board of Directors. The complete safety plan is reviewed by the District 4 Safety Officer, Michael Cormier.

*Arrangements will be made in advance of all games and practices for emergency medical services.

*No games or practices will be held when weather or field conditions are bad, particularly with lightning. The Safety Officer will make the determinations in this respect.

*All team equipment will 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.

*Prior to all practices and games, the coaches and umpire will walk the field/playing area to ensure all premise are free of debris, holes, and any other hazardous material or condition. *Responsibility for keeping bats and loose equipment off the field of play is that of a player assigned for this purpose or the team’s manager and coaches.

*During practice and games, all players will be encouraged to be alert and watching the batter on each pitch.

*During warm-up drills, players will be spaced so that no one is endangered by wild throws or missed catches.

*All pre-game warm-ups will be performed within the confines of the playing field and not within areas that are frequented by, and thus endanger spectators (i.e., playing catch, swinging bats, etc.)

*Batters will wear Little League approved protective helmets during batting practice and games. All equipment will undergo intense preseason inspections by the Safety Officer and Field Maintenance Coordinator. All gear found to be broken or not useable will be disposed of properly, away from children so reuse/misuse will not be a factor. All equipment needs will be tracked and brought to the attention of League Board Officials. *Catchers will wear catcher’s helmet, mask, throat guard, long model chest protector, shin guards and protective cup with athletic supporter at all times (males) for all practices and games.

NO EXCEPTIONS.

*Except when runner is returning to a base, head-first slides are not permitted.

*A published copy of this 2025 Safety Plan will be on file in the field concessions stand. A published, printed copy will also be distributed to all board members, manager and coaches, and all volunteer staff members. This includes a copy of the Board approved Concession Stand Manual, which is included in this 2025 plan.

*A copy of all emergency contact numbers and those of all key League Officials is included in this plan and are posted in the onsite in the concessions stand. Instructions on how to handle emergency situations, including non-emergency ones, are listed in the plan and posted in the concessions stand area. All applicable forms are included as well. All accidents and ‘near misses’ are to be reported on an official accident form located in the concessions stand, as well as, immediate notification of the Safety Officer within 24-48 hours of every incident.

EMERGENCY PHONE LIST

LOU GEHRIG LITTLE LEAGUE

Worcester Little League
Worcester Park and Recreation Dept.
(508) 799-1190
50 Skyline Drive
Worcester, MA 01605

Lou Gehrig Board of Directors

Officers

Kiera LaBonte – President – (508)-450-5852
Scott Roncka – Vice President, League Treasurer - (774) 242-1498
John Connolly – Safety Officer (508) 667-2252
Jeff Sonnenberg- Secretary (508) 400-4954
Jay Gaudreau - League Player Agent - (774) 262-5109
Kelly Muniz - League Player Agent, League Secretary 2 - (508) 740-2757
Albert Walles - League Player Agent - (774) 823-7440
Joshua Murphy - League Player Agent - (774) 418-5177
Juan Ortiz - League Player Agent – (774) 452-0640

EMERGENCY NUMBERS

Worcester Police/Fire/EMT: 911
Worcester (UMASS) Hospital Ambulance: (508) 421-5705
AAPCC Poison Control Center: (800) 222-1222

NON-EMERGENCY CONTACT NUMBERS

Worcester Police - Non-Emergency (508) 799-8600
Worcester Fire Dept. - Non-Emergency (508) 799-1816
Worcester County Sheriff - Non-Emergency (508) 752-1100

UTILITIES - EMERGENCY

NSTAR Gas Dept. (781) 441-8592
National Grid Electric Co. (800) 548-8000
Worcester Water Dept. (508) 929-1300

AREA HOSPITALS

St. Vincent Hospital (508) 363-5000
UMass Memorial Medical Center (508) 334-1000
Memorial Campus
University Campus
Hahnemann Campus

CONCESSION TRAINING

*Concession Stand training will include handling of food, etc. as well as, an annual inspection of Concession Stand Facility by the City of Worcester.

*An annual Facility Survey is completed and submitted along with this 2025 Safety Plan.

*A complete, full size First-Aid kit will be in the concessions stand always. Each team will be presented with a travel size First-Aid kit which will be required to be on hand at all practices and games.

*Lou Gehrig Little League, Inc. follows all Little League International rules and regulations including rules of play and any and all rules affecting the safety of the players, coaches, etc. A copy of the complete rule book is provided to each team for proper referencing of all rules, etc. All rules are followed during times of practices and games. These rules including but not limited to, proper equipment use, inspections, pitcher warmups, etc.

*Lou Gehrig Little League, Inc uses disengaging, break-away, bases always as required since 2008.

*All bleachers for spectators are kept behind field fence and have railings on each side, as well as, a higher railing at the back to prevent injuries.

COACHES CLINICS

All managers are required to attend The Coaching Clinic on Sunday, March 29, 2025.

A coach from each team will be required to attend this clinic. All coaching staff is required to attend a coaching clinic once every 3 years. First Aid training is being required for at least 1 member of each team's coaching staff. A member of the board will be present to witness participation.

First Aide Training will be provided on March 14, 2025 at South High School. A training/clinic tracking sheet will be held by Safety Officer as proof of training.

LOU GEHRIG LITTLE LEAGUE, INC runs background checks on all board members, managers, coaches and all other volunteers. All these groups of individuals will be required to complete the 2025 Volunteer Application and provide required documentation for identify proof. MASSACHUSETTS REQUIRED CORI CHECKS, AS WELL AS, COMPLETE BACKGROUND CHECKS ON WWW.JDP.COM ARE PERFORMED ON ALL.

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Last Modified: 12/6/2024

EMERGENCY CONTACT PROCEDURES


The most important help you can provide to a victim who is seriously injured is to call for professional medical help. Make the call quickly, preferably from a cell phone near the injured person. If this is not possible, send someone else to make the call from a nearby telephone. Be sure that you or another caller follows these steps.

- 1) First dial 9-1-1.
- 2) The address is, Lou Gehrig Little League Field Vernon Hill
- 3) Cross-streets are, Stockton St. Providence St. Vernon St.
- 4) Provide your name and the number you are calling from
- 5) What happened i.e., a baseball-related accident, bicycle accident, fire, fall, etc.?
- 6) How many people are involved?
- 7) The condition of the injured person i.e., unconscious, chest pains, or severe bleeding?
- 8) What help is being given (first aid, CPR, etc.)?
- 9) Do not hang up until the dispatcher hangs up.
- 10) The dispatcher may be able to tell you how to best care for the victim.
- 11) Continue to care for the victim until professional help arrives.
- 12) Appoint someone to go to the street and look for the ambulance or fire engine and flag them down if necessary.
- 13) CALL THE SAFETY OFFICER

NON-EMERGENCY CONTACT PROCEDURES

When an incident occurs that is not a serious injury or life-threatening event, please follow the necessary steps to record the injury:

- 1) First locate a parent/legal guardian
- 2) Call the SAFETY OFFICER
- 3) The injured player/person should be isolated from the game to avoid further incident
- 4) Grab an Incident Report from the concession stand and fill out as much information as possible
- 5) When in doubt about the severity of the injury, contact Emergency Services
This saves valuable time. Remember, every minute counts.

 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)	
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"/> SOFTBALL	<input type="checkbox"/> T-BALL (4-7)	<input type="checkbox"/> MANAGER, COACH	<input type="checkbox"/> PRACTICE
<input type="checkbox"/> CHALLENGER	<input type="checkbox"/> MINOR (8-12)	<input type="checkbox"/> VOLUNTEER UMPIRE	<input type="checkbox"/> SCHEDULED GAME
<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 (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 (13-18)	<input type="checkbox"/> VOLUNTEER WORKER	<input type="checkbox"/> OTHER (Describe)
<input type="checkbox"/> SPECIAL EVENT (NOT GAMES) <input type="checkbox"/> SPECIAL GAME(S) (Submit a copy of your approval from Little League Incorporated)			
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/	<input type="checkbox"/> 20 NOSE	
<input type="checkbox"/> 21 UNKNOWN	PARAPLEGIC	<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	

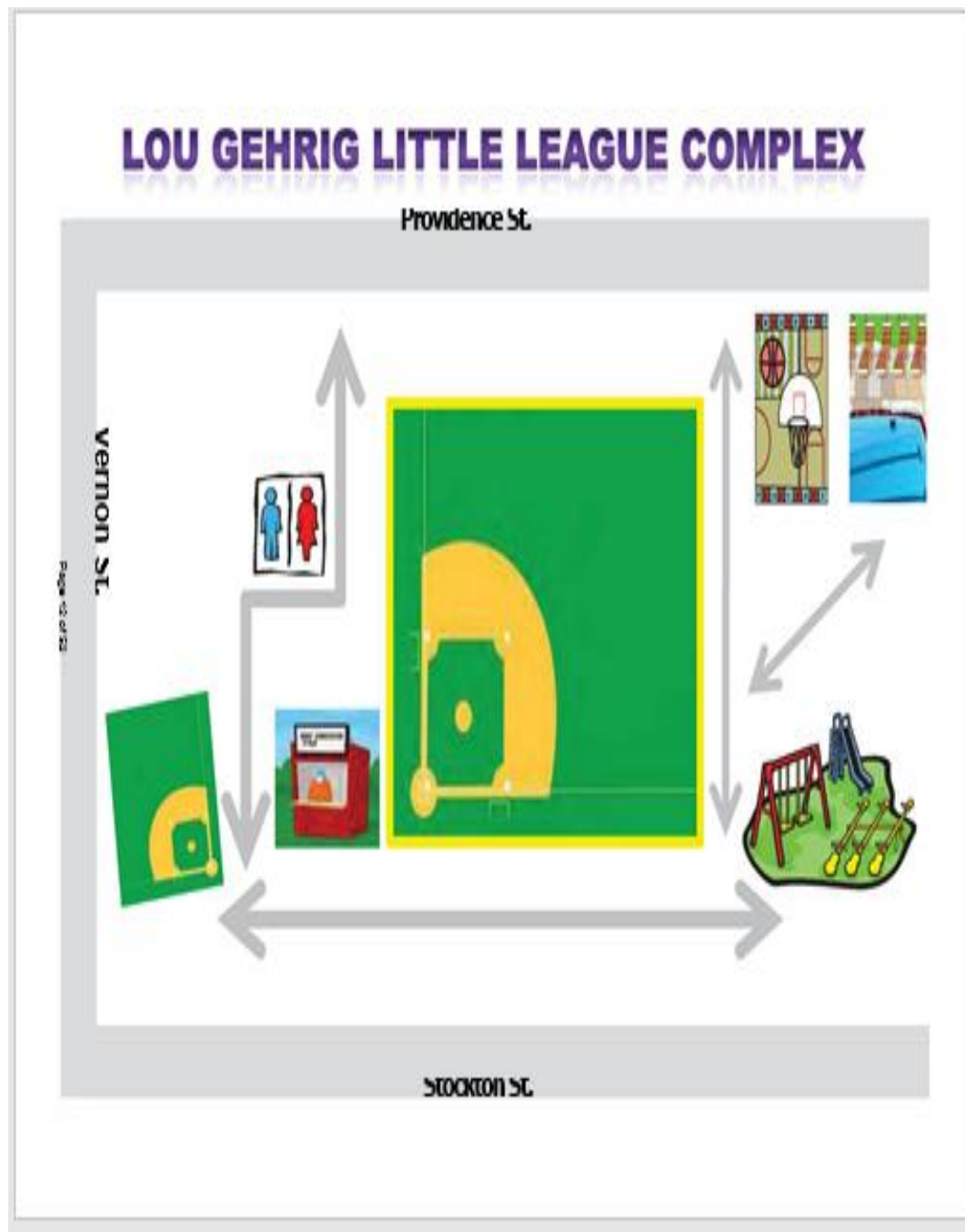
Does your league use batting helmets with attached face guards? ☐ YES ☐ NO

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 _____

For Local League Use Only		A Safety Awareness Program's Incident/Injury Tracking Report	
Activities/Reporting			
League Name: _____	League ID: _____ - _____ - _____	Incident Date: _____	
Field Name/Location: _____		Incident Time: _____	
Injured Person's Name: _____		Date of Birth: _____	
Address: _____		Age: _____ Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	
City: _____	State: _____ ZIP: _____	Home Phone: () _____	
Parent's Name (if Player): _____		Work Phone: () _____	
Parents' Address (if Different): _____		City: _____	
Incident occurred while participating in:			
A.) <input type="checkbox"/> Baseball <input type="checkbox"/> Softball <input type="checkbox"/> Challenger <input type="checkbox"/> TAD B.) <input type="checkbox"/> Challenger <input type="checkbox"/> T-Ball <input type="checkbox"/> Minor <input type="checkbox"/> Major <input type="checkbox"/> Intermediate (50/70) <input type="checkbox"/> Junior <input type="checkbox"/> Senior <input type="checkbox"/> Big League C.) <input type="checkbox"/> Tryout <input type="checkbox"/> Practice <input type="checkbox"/> Game <input type="checkbox"/> Tournament <input type="checkbox"/> Special Event <input type="checkbox"/> Travel to <input type="checkbox"/> Travel from <input type="checkbox"/> Other (Describe): _____			
Position/Role of person(s) involved in incident:			
D.) <input type="checkbox"/> Batter <input type="checkbox"/> Baserunner <input type="checkbox"/> Pitcher <input type="checkbox"/> Catcher <input type="checkbox"/> First Base <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Short Stop <input type="checkbox"/> Left Field <input type="checkbox"/> Center Field <input type="checkbox"/> Right Field <input type="checkbox"/> Dugout <input type="checkbox"/> Umpire <input type="checkbox"/> Coach/Manager <input type="checkbox"/> Spectator <input type="checkbox"/> Volunteer <input type="checkbox"/> Other: _____			
Type of injury: _____			
Was first aid required? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what: _____			
Was professional medical treatment required? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what: _____			
(If yes, the player must present a non-restrictive medical release prior to being allowed in a game or practice.)			
Type of incident and location:			
A.) On Primary Playing Field <input type="checkbox"/> Base Path: <input type="checkbox"/> Running or <input type="checkbox"/> Sliding <input type="checkbox"/> Hit by Ball: <input type="checkbox"/> Pitched or <input type="checkbox"/> Thrown or <input type="checkbox"/> Batted <input type="checkbox"/> Collision with: <input type="checkbox"/> Player or <input type="checkbox"/> Structure <input type="checkbox"/> Grounds Defect <input type="checkbox"/> Other: _____			
B.) Adjacent to Playing Field <input type="checkbox"/> Seating Area <input type="checkbox"/> Parking Area C.) Concession Area <input type="checkbox"/> Volunteer Worker <input type="checkbox"/> Customer/Bystander			
D.) Off Ball Field <input type="checkbox"/> Travel: <input type="checkbox"/> Car or <input type="checkbox"/> Bike or <input type="checkbox"/> Walking <input type="checkbox"/> League Activity <input type="checkbox"/> Other: _____			
Please give a short description of incident: _____			
Could this accident have been avoided? How: _____			
<p><small>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_public/accident/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_public/accident/GlClaimForm.pdf</small></p>			
Prepared By/Position: _____		Phone Number: () _____	
Signature: _____		Date: _____	



MANAGERS AND COACHES

1) Safe Playing Areas

Regular safety inspections of all fields, (practice and game), structures, and dugouts, will eliminate conditions that cause accidents.

Managers, coaches, and umpires will be required to check practice and playing areas for:

- > Holes, damage, rough or uneven spots, slippery areas, and long grass, glass, rocks, foreign objects
- > Damage to screens or fences, including holes, sharp edges, or loose edges
- > Unsafe conditions around backstop, pitcher's mound, or warning track

2) Safe Equipment

All equipment will be inspected before each use. Regular safety inspection of equipment is essential.

Managers, coaches, and umpires should:

- > Be sure all equipment is LL approved
- > Inspect all bats, helmets, and other equipment on a regular basis.
- > Dispose of unsafe equipment properly
- > Keep loose equipment stored properly
- > Have all players remove all personal jewelry
- > Repair or replace defective equipment

3) Safe Procedures

Managers and coaches must:

- > Have a first aid kit with you all practices and games
- > Have access to a telephone in case of emergencies
- > Know where the closest emergency shelter is in case of severe weather
- > Ensure warm-up procedures have been completed by all players
- > Stress the importance of paying attention, no "horse playing allowed"
- > Instruct the players on proper fundamentals of the game to ensure safe participation
- > Each practice should have at least two coaches in case of an emergency
- > No Coach is allowed to catch their pitchers at any time. This includes standing in the backstop area.



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**

Copy and post at dugouts

Coach, Please Let Players Catch!

REMEMBER:

Coaches and managers must not warm up pitchers.

Let Players Catch.

RULE 3.09 "...Managers or coaches must not warm up a pitcher at home plate or in the bull pen or elsewhere at any time. They may, however, stand to observe a pitcher during warm-up in the bull pen." Page 19 of 52, 6 March 2003

Use good sportsmanship on the field.

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.”

EQUIPMENT CHECKLIST

KEEP OUR KIDS SAFE!!!

REQUIRED PLAYER EQUIPMENT:

Defense

Athletic Supporter – All Male Players

Metal, Fiber, or plastic type cup – All catchers

Catcher’s Helmet and Mask –with THROAT guard: No Skull caps-All catchers; must be worn during pitcher warm up, in-field practice, while batter is in the box

Catcher’s Mitt – all baseball catchers

Chest protector and leg protectors – all catchers; must be worn while batter is in the box; long model chest protector required for Little League (Majors) and younger catchers

Offense

Helmet meeting NOCSAE standards – all batters, base runners, and players in coaches’ boxes

Helmet Chinstrap – all helmets made to have chinstrap (with snap buttons, etc.)

Regulation-sized ball – for the game and division being played; marked RS for regular season or RS-T for regular season and tournament play

Regulation-sized bat – all batters; Little League (Majors) and younger players must have approved bats

Non-Wood bats must have grip of cork, tape, or composite material, and must extend a minimum of 10 inches from the small end. Slippery tape is prohibited.

REQUIRED FIELD EQUIPMENT:

1ST, 2ND, and 3RD bases that disengage from their anchors

Pitcher’s plate and home plate

Player’s benches behind protective fences

Protective backstop and sideline fences

REMEMBER:

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

“...All catchers must wear a mask, ‘dangling’ type throat protector and catcher’s helmet during infield/outfield practice, pitcher warm-up and games.”

Bat Inspection Procedure

All league bats will be inspected and approved by Field Maintenance Coordinator and President. All bats will be provided a sticker to show they have been inspected and approved. Prior to each home game, the Safety Officer will inspect all bats being used by both teams using the Little League International Approved Bat Listing. Any bats not passing inspection or deemed illegal for use, will be removed from the dugouts. If those bats are personal bats of a player, the parent will be notified that the bat is illegal and cannot be used during a game or practice. If the Safety Officer is unable to be at a game, a stand in will be notified and will follow the same procedure for that game. All games will be noted in a record book and bat inspection indicated, signed, and date stamped. The book will be kept in the Snack Shack on the shelf above the sink. Authorized Inspectors are as follows:

1. Safety Officer
2. President
3. Vice President
4. Player Agent

IMPORTANT PART OF THE GAME

UMPIRES:

Who is responsible for the conduct of umpires?

First and foremost, it is the umpire himself/herself. Each of us in Little League must take responsibility for our own actions. However, umpires are appointed by the local league president and approved by the local league board of directors. Only the local league board of directors has the authority to dismiss or suspend any local league umpire from regular season games.

A select group of volunteer umpires whose knowledge, experience and demeanor have received recognition at top levels of Tournament Play are invited each year to officiate at one of the World Series tournaments. In keeping with the volunteer aspect of the local league, travel expenses for World Series umpires are borne by the umpires themselves.

The District Administrator is responsible for nominating umpires (those who volunteer their time to local Little Leagues within the district) for upper level tournaments. Most umpires who reach the pinnacle of youth sports officiating (one of the World Series of Little League Baseball or Softball) have been volunteering their time to local Little Leagues for a decade or more.

Before the Game

Meet at home plate

Introduce plate and base umpires, managers/coaches

Receive official lineup cards from each team

Discuss any local playing rules (time limit, playing boundaries, etc.) ☐ Discuss the strike zone

Discuss unsportsmanlike conduct by the players

Discuss the innings pitched by a pitcher rule

Clarify calling the game due to weather or darkness
Inspect playing field for unsafe Conditions
Discuss legal pitching motions or balks, if needed
Discuss no head-first slides, no on-deck circle rules
Get two game balls from home team
Be sure players are not wearing any jewelry
Be sure players are in uniform (shirts in, hats on)
Inspect equipment for damage and to meet regulations
Ensure that games start promptly

During the Game

Umpires and Coaches

Encourage coaches to help speed play by having catchers and players on the bench prepared and ready to take the field with two outs ☐ Make sure catchers are wearing the proper safety equipment
Continually monitor the field for safety and playability
Pitchers warming up in foul territory must have a spotter and catcher with full equipment
Keep game moving — one minute or eight pitches to warm up the pitcher between innings or in case of mid-inning replacement
Make calls loud and clear, signaling each properly
Umpires should be in position to make the call
No protesting of any judgment calls by the umpire
Managers are responsible for keeping their fans and players on their best behavior
Encourage everyone to think “Safety First!”

WEATHER CONDITIONS

rain...lightning...awareness...

SAFETY

If You See It, Flee It;

If You Hear It, Clear It

REMEMBER:

- 1) Track approaching storms the best way possible:
Internet radar websites, dedicated storm warning system at field, or other storm warnings
- 2) Evacuate fields when storms are about 10 miles away: Have players and spectators go to enclosed building or to cars with windows rolled up
- 3) Clear fields immediately after thunder has been heard or lightning seen!

PLEASE WAIT!

- Wait 30 minutes before returning to play after last sign of lightning activity in your area
- Cars shouldn't leave until the game is called, so all players can be accounted for
Guidelines from the National Oceanic and Atmospheric Administration's (NOAA) National Weather Service

- 1) Lightning victims do not carry an electrical charge, are safe to handle, and need immediate medical attention.
- 2) Call for help. Have someone call 9-1-1 or your local ambulance service. Medical attention is needed as quickly as possible.
- 3) 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.
- 4) Begin CPR if necessary.
- 5) 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.

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. An electronic weather detector is located inside the concessions stand.

>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.

CONCESSION STAND TIPS

1. MENU – keep menu clearly visible and eliminate use of fruits and vegetables as often as possible to avoid bacteria.
2. COOKING – all foods should be kept in climate-controlled areas and cooked for a generous amount of time to kill off any bacteria and germs.
3. REHEATING – do not attempt to heat foods in crock pots or sterno used devices. Slow cooking devices may allow for growth of bacteria.
4. COOLING AND COLD STORAGE – foods that require refrigeration should be kept in temperature lower than 41 degrees F. Periodically check temperature to ensure this degree is maintained.
5. HAND WASHING – frequent and thorough hand washing is required. The use of anti-bacterial gel and hand creams are acceptable. Disposable gloves should be worn as often as possible.
6. HEALTH AND HYGIENE – only healthy workers should be allowed to prepare and serve food. Workers should wear clean outer clothing and should not be allowed to smoke during hours of volunteering within the concession area.
7. FOOD HANDLING – avoid hand holding of raw food. Use acceptable disposable utensils to serve food.
8. DISHWASHING – use disposable utensils as often as possible. In the event washable utensils are used, follow these guidelines:
 - Wash in HOT soapy water
 - Rinse in CLEAN water
 - Chemical or Heat sanitize
 - Air dry
9. ICE – should be used to cool drinks, no cups should be used.
10. WIPING CLOTHS – rinse and store wiping cloths in sanitizing bucket with water and bleach. Bucket should be kept away from food storage.
11. INSECT CONTROL AND WASTE – keep foods covered to protect them from insects. Keep pesticides away from food. Always dispose of waste at the end of the day in a proper location outside of the concession area. All water should be portable water from an approved source.
12. MINIMUM WORK AGE – no worker should be younger than 15 years of age.

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


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Little League® Data Center Login

 Email Address

 Password

Log In

[Forgot Password?](#)

Logging In to the Little League® Data Center

Your Data Center username is the same as the email address on your league or district officer record. Please confirm with your League President or District Administrator that you have been added as an officer, and that your email address is correct. You should receive an email with password setup instructions once listed as an officer.

If you need to reset your Data Center password, please [click here](#) and enter your email address to receive password reset instructions.

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Questions? Email support@littleleague.org or call (570) 326-1921 ext. 2800.

Our League will have all required information submitted according to deadlines communicated by Little League International. We will also adhere to all future requirements for use of the data center for submission of player, manager, and coach's information.

District 4
Worcester, MA

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