



Emergency Action Plan

Las Vegas Little League

2026

Be Prepared

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Introduction

This Emergency Action Plan (EAP) is designed to provide clear, systematic procedures for responding to various emergencies that may occur during Las Vegas Little League activities, including practices, games, and events. The primary goal is to ensure the safety and well-being of all participants, spectators, and staff. All coaches, volunteers, and league officials are required to familiarize themselves with this plan and be prepared to execute the designated protocols promptly and effectively.

Code of Conduct

The Las Vegas Little League Board of Directors has implemented a “Zero Tolerance” policy in regard to ANYONE present at an ALL-sponsored event, whether on the field or off. Our main desire is to ensure all league events remain safe for all present.

The term “Zero Tolerance” encompasses a wide range of actions or verbiage directed from one person to another, or to a whole group of people. This includes, but is not limited to:

- Making derogatory comments about an official’s call or making defaming statements to umpires themselves.
 - o Note: Spectators must not engage with umpires regarding their calling of the game.
- Making derogatory comments about any manager or coach’s ability to coach, or the decisions they make concerning the players on their teams.
- Making derogatory comments to any player, on the field or off, for any reason.
- Any negative remark made from one spectator to another which incites verbal altercation.
- Any aggressive physical altercation made by anyone.

This policy is being implemented to help ensure that these conditions are maintained.

Any player, manager, coach, umpire, league representative or spectator who is in a verbal or physical altercation, or an incident or unsportsmanlike conduct, at the game site or any other Little League activity will be asked to leave the premises.

Emergency Contacts

Emergency

Service	Contact Information
Police / Fire / AMR (Medical)	911
Alta Vista Regional Hospital	505-426-3500
NM Poison Control	1-800-222-1222 (Toll Free)
NM Children, Youth and Families	1-800-797-3260 (Toll Free)

 Law Enforcement

Department	Phone Number
Las Vegas Police Department	505-425-7504
New Mexico State Police	505-425-6771
San Miguel Co. Sheriff's Office	505-425-7589

 Municipal Services & Utilities

Service	Phone Number
City of Las Vegas Fire Department	505-425-6321
City of Las Vegas Gas Department	505-454-3832
PNM Electric	1-888-342-5766

Las Vegas Little League Contacts

Primary Contacts

Role	Name	Email	Phone
League President	Steven Gonzales	President@lasvegaslittleleague.net	(505) 617-5130
League Vice President / League Treasurer	Tanya Arrellin	VPTreasurer@lasvegaslittleleague.net	(505) 718-6628

League Safety Officer	Adrian Jaramillo II	Safetyofficer@lasvegaslittleleague.net	(505) 426-5320
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Additional Contacts

Role	Name	Email	Phone
League Secretary / League Information Officer	Brandy Garcia	Secretary@lasvegaslittleleague.net	(505) 901-0094
League Player Agent	Jasmin Ramirez	Playeragent@lasvegaslittleleague.net	(505) 243-4483

League Coaching Coordinator	Tim Olivas	Coachingcoordinator@lasvegaslittleleague.net	(505) 310-7309
League Field Maintenance	Ray Arrellin	Fieldmaintenance@lasvegaslittleleague.net	(505) 718-9857
League Building & Property Manager	James Lopez	Buildingmaintenance@lasvegaslittleleague.net	(505) 426-6533
District 4 Administrator	Ken Abeyta	kenabeyta@gmail.com	
District 4 Safety Officer	Dustin Walton	djwalton93@aol.com	

Emergency Contact Procedures

The most critical assistance to render to an individual sustaining a serious injury is to immediately contact professional medical services. This call should be initiated promptly, ideally from a mobile device situated near the injured party. If direct communication is not feasible, delegate the task of contacting emergency services from a nearby fixed telephone line. Ensure that the caller adheres to the following protocol:

1. **Dial 9-1-1.**
2. **Provide the necessary information to the dispatcher.** Respond accurately to all inquiries. Dispatchers typically require:
 - **The precise location or address of the emergency.** Include the municipality, adjacent intersections, conspicuous landmarks, as well as the designation and physical coordinates of the sports facility.
 - Our location is: On Park Place at Keyes Park. Cross-streets are: Grand Avenue and Mills Avenue.
 - **The telephone number utilized for the emergency call.**
 - **The full name of the caller.**
 - **A concise description of the incident** (e.g., a baseball-related accident, bicycle accident, fire, fall, etc.).
 - **The number of individuals involved.**
 - **The current condition of the injured person** (e.g., unconscious, experiencing chest pains, or bleeding).
 - **The immediate care being administered** (e.g., first aid, Cardiopulmonary Resuscitation [CPR], etc.).
3. **Maintain the connection until the dispatcher explicitly terminates the call.** The dispatcher may offer crucial guidance regarding the optimal care for the victim.
4. **Continue to provide appropriate care for the victim** until the arrival of professional assistance.
5. **Designate an individual to proceed to the main thoroughfare** to observe for and signal the approaching ambulance or fire apparatus, if necessary. This action is vital for minimizing response time. Recall that every minute is essential.

Evacuation Plan

Introduction

The safety of our players, coaches, volunteers, and spectators is our highest priority. While we hope to never use this plan, preparing for potential emergencies ensures we can act quickly, calmly, and effectively. This Emergency Action Plan (EAP) outlines procedures for various severe incidents that may occur during Little League activities.

Weather and Natural Disasters

New Mexico is susceptible to severe storms, lightning, earthquakes, and fire. Should an immediate threat arise, the following protocol must be followed by all participants and attendees:

1. **Immediate Action:** Upon the declaration of an emergency by an Umpire, Coach, or League Official, all players must immediately return to their designated dugout.
2. **Parental Reconnect:** Parents or guardians attending the game should immediately proceed to the dugout to retrieve their child(ren).
3. **Manager Responsibility:** If a player's parent or guardian is not attending the game, the Team Manager (or designated Coach) assumes responsibility for the player's immediate safety and evacuation until the player can be safely handed off to the authorized person.
4. **Orderly Evacuation:** Once parents have retrieved their children, everyone must proceed to their vehicles in a calm and orderly manner.
5. **Vehicle Movement:** Drivers must proceed slowly and cautiously out of the facility, strictly observing the **5 MPH** speed limit within the facility grounds.
6. **Post-Facility Traffic:** Once outside the facility, drivers must observe all posted public speed limits and traffic laws.

Inclement Weather

Most of our days in New Mexico during the season, the weather is cool and sunny but there are those days when the weather turns bad and creates **unsafe weather conditions**.

Rain

If it begins to rain:

1. Evaluate the strength of the rain. Is it a light drizzle or is it pouring?
2. Determine the direction the storm is moving.
3. Evaluate the playing field as it becomes more and more saturated.
4. Stop practice if the playing conditions become unsafe -- use common sense. If playing a game, consult with the other manager and the umpire to formulate a decision.

Lightning (see ***Appendix A - Lightning Safety Guidelines LL rulebook***)

Because people have been struck many miles away from a storm, seeking immediate and effective shelter when thunderstorms approach is an important part of lightning safety. This is why the National Weather Service recommends those in charge have a lightning safety plan and that we follow the plan without exception.

Emergency Preparedness Resources:

- Little League Lightning & Severe Weather Safety Guidelines
(<https://www.littleleague.org/university/articles/staying-safe-from-lightning-at-the-field/>)

Who should monitor the weather and who is responsible for making the decision to stop activities?

Lightning safety plans should specify that someone be designated to monitor the weather for lightning. The 'lightning monitor' should not include the coaches, umpires, or referees, as they are not able to devote the attention needed to adequately monitor conditions. The 'lightning monitor' must know the plan's guidelines and be empowered to assure that those guidelines are followed.

When should activities be stopped?

The sooner activities are stopped and people get to a safe place, the greater the level of safety. In general, a significant lightning threat extends outward from the base of a thunderstorm cloud about 6 to 10 miles. Therefore, people should move to a safe place when a thunderstorm is 6 to 10 miles away. Also, the plan's guidelines should account for the time it will take for everyone to get to a safe place. Here are some criteria that could be used to halt activities.

If lightning is observed. The ability to see lightning varies depending on the time of day, weather conditions, and obstructions such as trees, mountains, etc. In clear air, and especially at night, lightning can be seen from storms more than 10 miles away provided that obstructions don't limit the view of the thunderstorm.

If thunder is heard. Thunder can usually be heard from a distance of about 10 miles provided that there is no background noise. Traffic, wind, and precipitation may limit the ability to hear thunder less than 10 miles away. If you hear thunder, though, it's a safe bet that the storm is within ten miles.

If the time between lightning and corresponding thunder is 30 seconds or less. This would indicate that the thunderstorm is 6 miles away or less. As with the previous two criteria, obstructions, weather, noise, and other factors may limit the ability to use this criterion. In addition, a designated person must diligently monitor any lightning. In addition to any of the above criteria, activities should be halted if the sky looks threatening. Thunderstorms can develop directly overhead and some storms may develop lightning just as they move into an area.

When should activities be resumed?

Because electrical charges can linger in clouds after a thunderstorm has passed, experts agree that people should wait at least 30 minutes after the storm before resuming activities.

What should be done if someone is struck by lightning?

Most lightning strike victims can survive a lightning strike; however, medical attention may be needed immediately – have someone call for medical help. Victims do not carry an electrical charge and should be attended to at once. In many cases, the victim's heart and/or breathing may have stopped and CPR may be needed to revive them. The victim should continue to be monitored until medical help arrives; heart and/or respiratory problems could persist, or the

victim could go into shock. If possible, move the victim to a safer place away from the threat of another lightning strike.

Hot Weather

Precautions must be taken in order to make sure the players on your team do not *dehydrate* or *hyperventilate*.

1. Suggest players take drinks of water when coming on and going off the field between Innings.
2. If a player looks distressed while standing in the hot sun, substitute that player and get him/her into the shade of the dugout A.S.A.P.
3. If a player should collapse as a result of heat exhaustion, call 9-1-1 immediately. Get the player to drink water and use the instant ice bags supplied in your First-Aid Kit to cool him/her down until the emergency medical team arrives. (See section on Hydration)

Cold Weather

Due to the extreme weather in New Mexico, the early part of the season may become quite cold and possibly even snow. In order to protect our players, if the temperature is below 40 degrees with wind chill the game or practice will be suspended. The team manager may contact the LVLL board to try and reschedule the game if possible.

Encourage players to dress in layers as appropriate and cover as much skin as possible whenever participating in a practice or game during cold weather. Hydration continues to be important regardless of air temperature.

Health and Medical

Introduction

First-Aid, as the term clearly denotes, is the **initial and immediate care** provided to an individual who has suffered an injury or sudden illness. It is a vital intervention, typically performed by the first person on the scene—often a layperson—and is intended to stabilize the victim's condition until professional medical assistance arrives. This professional help is usually delivered by Emergency Medical Services (EMS), such as 9-1-1 paramedics. *The Limits of First-Aid and the Importance of Knowing Your Capabilities*

It is absolutely paramount that anyone administering First-Aid understands and adheres to their personal training and knowledge limitations. **At no time should an individual administering First-Aid attempt to go beyond their capabilities.** This is not only a matter of personal safety but a critical ethical and legal responsibility. Know your limits!

First-Aid training provides essential skills for immediate, life-saving measures, such as controlling severe bleeding, performing CPR, or stabilizing a suspected fracture. However, it does not equip a layperson with the advanced medical knowledge, diagnostic tools, or pharmacological resources of a trained paramedic or physician. Attempting procedures outside one's skill set can cause greater harm to the victim. *The Professional Response: Paramedics and EMS*

In a genuine emergency requiring professional help, the immediate action should be to call 9-1-1. The average response time for 9-1-1 calls can vary widely based on location and circumstances, but is typically **10 to 15 minutes**. While this waiting period can feel prolonged, it is a critical time for the First-Aid provider to maintain the victim's stability.

Your responsibility as the initial First-Aid provider is to perform whatever appropriate and safe First-Aid measures you are capable of, and then **wait for the paramedics to arrive**. They are equipped with the specialized vehicle (ambulance) and the trained personnel necessary to monitor, treat, and safely transport the victim while maintaining their stability and providing critical care throughout the journey. Self-transportation risks further injury, delays definitive treatment, and removes the patient from the continuous monitoring that a trained EMS team provides.

First Aid Kits

Getting and Keeping Them Ready:

We'll make sure every team gets a full First Aid Kit *before* the playing season starts. For First Aid preparedness, all volunteers of Las Vegas LL are required to take the **Little League First Aid Awareness Training**

Must-Haves and Where to Keep Them:

It's a requirement that everyone on the team has a charged, working cell phone handy during all team activities (practices *and* games) for emergency calls. The First Aid Kit isn't optional; it's a key part of your team's gear. It **must** be with you and easily accessible at *all* team functions, including:

- All scheduled practices (on and off-field).
- Batting cage sessions.
- All regular season games.
- All post-season games.
- Any other official Las Vegas Little League event where the kids' safety might be an issue.

What to Do When Supplies Run Low:

Keeping the First Aid Kits fully stocked is a joint effort between the team and the league. If you use any supplies from the kit, the Team Manager, one of the coaches, or the team mom needs to call the LVLL Safety Officer immediately for a restock. The Safety Officer's contact info (phone and mailing address) can be found in the Little League Contacts.

End-of-Season Checklist:

When the season wraps up, all items issued to you must be accounted for and returned to the league. Please turn in the complete First Aid Kit and your team's entire equipment package.

Kit Details:

Each official First Aid Kit comes in a sturdy, easy-to-spot durable case, usually white and red. This standard kit is designed to handle typical on-field injuries and contains at least these essential items:

Concussion

LAS VEGAS LL confirms adherence to required concussion training and maintains a protocol for identifying and responding to suspected head injuries during practices and games.

All volunteers are strongly encouraged to adopt the "When in doubt, sit them out" philosophy, immediately removing players from play if a concussion is suspected.

Common Signs and Symptoms of a Potential Concussion:

- Headache or pressure in the head
- Dizziness or balance problems
- Confusion, memory issues, or appearing "out of it"
- Nausea or vomiting
- Blurred vision or sensitivity to light or noise
- Unusual player behavior

How to manage a concussion injury:

1) If a player, remove the player from the game.

2) See that the victim gets adequate rest.

3) Note any symptoms and see if they change within a short period of time.

4) If the victim is a child, tell parents about the injury and have them monitor the child after the game.

5) Urge parents to take the child to a doctor for further examination.

6) If the victim is unconscious after the blow to the head, diagnose head and neck injury. **DO NOT MOVE** the victim. Call 9-1-1 immediately. (See below on how to treat head and neck injuries)

Choking

If a Victim is Experiencing Choking

Partial Airway Obstruction with Adequate Air Exchange

Symptoms may include a forceful cough accompanied by wheezing sounds between coughs.

Treatment:

Encourage the victim to continue coughing as long as adequate air exchange is maintained.
DO NOT interfere with attempts to expel the obstructing object.

Partial or Complete Airway Obstruction in a Conscious Victim

Symptoms may include: A weak cough; high-pitched crowing noises during inhalation; inability to breathe, cough, or speak; the universal distress signal of clutching the neck; exaggerated breathing efforts; or a dusky or bluish skin color (cyanosis).

Treatment - The Heimlich Maneuver (Abdominal Thrusts):

1. Stand behind the victim.
2. Reach around the victim with both arms, positioning them under the victim's arms.
3. Place the thumb side of one fist against the middle of the victim's abdomen, just above the navel. Grasp this fist with the other hand.
4. Administer quick, upward thrusts.
5. Repeat this procedure until the obstructing object is expelled.
6. If the victim becomes unresponsive, gently ease them to the ground and initiate chest compressions.

Bleeding

General Bleeding Control

Always put on latex gloves from your First-Aid Kit before treating bleeding to prevent contact with the victim's blood.

For Minor Bleeding:

- Allow a small amount of bleeding to clean the wound.
- Wash the area with warm water and soap.
- Apply a dressing to keep the wound clean and change it every few hours.
- Monitor closely for any signs of infection.

For Severe Bleeding: Follow the **R-E-D** Principle

1. **Rest:** Have the person rest to lower their heart rate and blood pressure.
2. **Elevate:** Raise the injured limb above the heart level to help slow the bleeding.
3. **Direct Pressure:** Apply pressure directly to the wound and secure the dressing in place.
 - **Do not** tie the dressing so tightly that it restricts blood flow.
 - **Do not** remove the dressing once it is applied.
 - **Seek medical help immediately by calling 9-1-1.**
- **If Direct Pressure is Insufficient:** Pack Quik-Clot™ into the wound before reapplying direct pressure.

Important Note on Impaled Objects:

- **Never remove an impaled object**, as this can cause significantly more injury and blood loss.
- Instead, place dressings around the object, securing them to control bleeding.
- Be extremely careful not to move the object.

Heat Stress

Heat-Related Illnesses: Recognition and Response

Heat Exhaustion

- **Symptoms:** Fatigue, irritability, headache, faintness, weak and rapid pulse, shallow breathing, cold and clammy skin, and profuse sweating.
- **Treatment:**
 1. Have the victim lie down in a cool, shaded area or an air-conditioned room. Elevate their feet.
 2. Massage the legs toward the heart.
 3. If the victim is conscious, provide cool water or an electrolyte solution every 15 minutes.
 4. Use caution when allowing the victim to sit up for the first time, even after they report feeling better.

Sunstroke (Heat Stroke)

- **Symptoms:** Extremely high body temperature (106°F or higher), hot, red, and dry skin, no sweating, rapid pulse, convulsions, and unconsciousness.
- **Treatment:**
 1. **Call 9-1-1 immediately.**
 2. Quickly lower the body temperature by placing the victim in a partially filled tub of cool (not cold) water (avoid over-cooling). Briskly sponge the victim's body until their temperature is reduced, then towel dry. If a tub is unavailable, wrap the victim in cold, wet sheets or towels in a well-ventilated room or use fans and air conditioners until their body temperature drops.
 3. **DO NOT** give stimulating beverages, such as coffee, tea, or soda (caffeine beverages).

Breaks and/or Dislocations

Treating youth sports breaks and dislocations involves immediate ***RICE*** (Rest, Ice, Compression, Elevation) and immobilization with a splint/sling, followed by professional medical care for proper realignment (closed reduction) and casting/surgery if needed, with rehabilitation focusing on gradual return to activity and strength building to prevent recurrence, a crucial step as kids are prone to re-injury. Never try to force a dislocated joint back in place; seek immediate medical help.

Immediate First Aid (On the Field)

- **Stop Activity & Immobilize:** Remove the child from play. Splint the injured limb in the position found, using padding and bandages to keep it still.
- **RICE:** Apply ice (wrapped in cloth) and use gentle compression (elastic bandage) and elevation to reduce swelling and pain.
- **Seek Medical Care:** Transport the child to a doctor, urgent care, or ER for X-rays and proper diagnosis.

Concession Stand Safety

Personnel Training and Responsibilities

All individuals working within the concession stands must undergo comprehensive training focused on safe food handling and equipment operation.

- **Safe Food Preparation and Handling:** Training will cover critical aspects of food safety, including proper handwashing techniques, temperature control for both hot and cold foods, prevention of cross-contamination, and storage guidelines for raw and prepared ingredients. Workers must understand the importance of maintaining a clean and sanitized workspace at all times.
- **Equipment Safety and Operation:** Workers will be thoroughly trained in the safe and correct operation of all cooking equipment, including grills, fryers, warmers, and any other appliances used. This includes start-up and shut-down procedures, monitoring for malfunctions, and recognizing potential hazards.
- **Training Provider:** This essential safety training will be provided and managed directly by the Concession Stand Manager, who is responsible for ensuring all staff are competent before beginning work.

Equipment Maintenance and Hazard Prevention

A proactive approach to equipment maintenance is essential to prevent accidents and ensure operational safety.

- **Periodic Equipment Inspection:** All cooking and preparation equipment will be inspected periodically (e.g., weekly or monthly, and before major events) by the Concession Stand Manager or a designated maintenance person. These inspections will check for wear and tear, proper function, and any potential safety issues.
- **Repair and Replacement:** Any equipment identified as damaged, malfunctioning, or unsafe will be promptly repaired or, if necessary, immediately removed from service and replaced to maintain the highest safety standards.

Fire Safety and Flammable Materials

Strict protocols must be followed to manage fire hazards, especially those associated with cooking.

- **Propane and Fuel Management:** After each use, propane tanks connected to grills or other cooking devices **must** be turned off at two points: the main valve on the propane tank itself and the control valve at the grill/appliance. This dual shut-off procedure

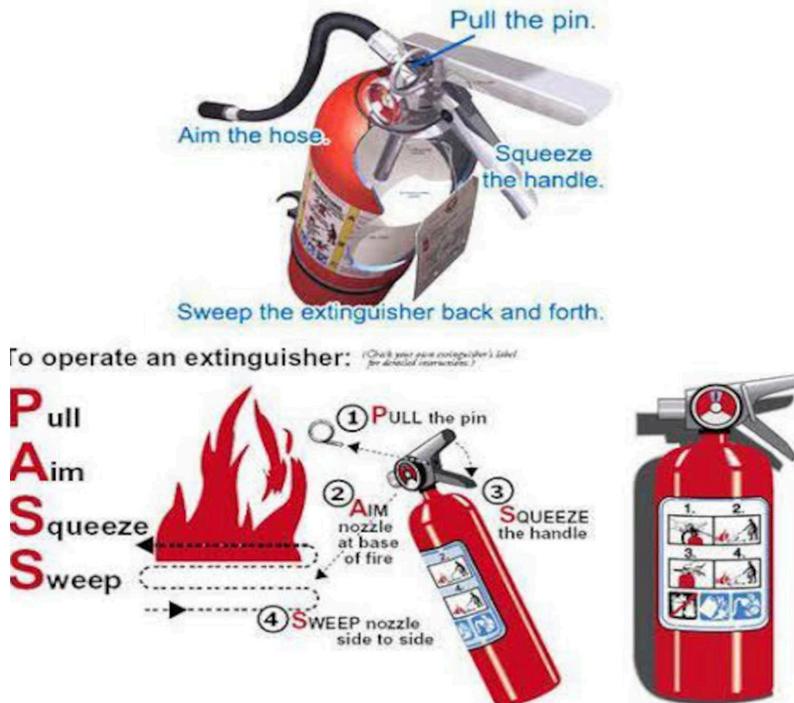
minimizes the risk of gas leaks.

- **Cooking Grease Storage:** Used cooking grease, a significant fire hazard, must be stored immediately and safely in heavy-duty, sealed, non-flammable containers. These containers must be kept in a designated area away from all open flames, heat sources, and combustible materials until properly disposed of.
- **Chemical Storage Security:** All cleaning chemicals, sanitizers, and other potentially hazardous substances must be stored securely in a **locked container or cabinet**. This measure prevents accidental spills, misuse, or access by unauthorized persons, particularly children.
- **Fire Extinguisher Requirements:** A Certified Fire Extinguisher specifically rated for Type K (kitchen/grease) fires must be maintained and positioned in a highly visible and easily accessible location within the concession stand at all times.
- **Fire Extinguisher Training:** All concession stand workers are required to receive explicit instruction and demonstration on the proper use of the fire extinguisher, including the **PASS** technique (Pull, Aim, Squeeze, Sweep) and knowing when to evacuate rather than fight a fire.

Emergency Preparedness and First Aid

The concession stand must be prepared to handle minor injuries and medical situations.

- **First Aid Kit:** A comprehensive, fully stocked First Aid Kit, appropriate for treating minor cuts, burns, and other common kitchen injuries, must be placed in an easily accessible, designated location within the Concession Stand. The Concession Stand Manager is responsible for verifying that the kit contents are not expired and are replenished as needed.



Child Abuse

Volunteers

Volunteers are the greatest resource Little League has in aiding children's development into leaders of tomorrow. But some potential volunteers may be attracted to Little League to be near children for abusive reasons.

Big Brothers/Big Sisters of America defines child sexual abuse as "the exploitation of a child by an older child, teen or adult for the personal gratification of the abusive individual." So abusing a child can take many forms, from touching to non-touching offenses.

Child victims are usually made to feel as if they have brought the abuse upon themselves; they are made to feel guilty. For this reason, sexual abuse victims seldom disclose the victimization. Consider this: Big Brothers/Big Sisters of America contend that for every child abuse case reported, ten more go unreported. Children need to understand that it is never their fault, and both children and adults need to know what they can do to keep it from happening.

Anyone can be an abuser and it could happen anywhere. By educating parents, volunteers and children, you can help reduce the risk it will happen at Las Vegas Little League.

Reporting

Any volunteer who participates in the league must report suspected child abuse, including sexual abuse, within 24 hours to the proper authorities. If a case of abuse is suspected within a league, it must be reported to the appropriate child services organizations and/or local law enforcement, as well as to the League President and District Administrator. **REMEMBER: If you or someone else is in immediate and serious danger, you should call 911.** After making a report of abuse or becoming aware of a report of abuse involving a volunteer in the league, the local Board of Directors must also notify Little League International by emailing SecuritySpecialist@LittleLeague.org.

Make Our Position Clear

Make adults and kids aware that Little League International and LVLL will not tolerate child abuse, in any form.

The Buddy System

It is an old maxim that rings true in every setting, especially in youth sports environments: **There is safety in numbers**. The principle behind the Buddy System is simple yet profoundly effective: it significantly reduces opportunities for harm, providing a fundamental layer of protection for every participant.

We strongly encourage all children, regardless of age or the immediate proximity of an adult, to adhere to this system. Children should always move about in a group of two or more, ideally with children of a similar age. This collective approach to mobility ensures constant, mutual supervision among peers.

The Buddy System Must Be Applied Universally:

- **Travel To and From Activities:** Whether walking from a car to the field, or to a designated pick-up spot, children should always walk with their assigned buddy or group.
- **Leaving the Field or Designated Area:** If a child needs to retrieve equipment, speak with a coach, or simply move away from the main group, they must be accompanied. A child should never be allowed to leave the direct, visible activity area alone.
- **Use of Restroom Areas:** Restrooms are a common area where children may find themselves alone. To mitigate this risk, children must use these facilities in pairs or small groups, with one person waiting near the entrance while the others are inside.

The simple act of being accompanied makes a potential victim far less accessible. It creates a visible deterrent, as it is exponentially more difficult to victimize, isolate, or coerce a child when they are not alone. The Buddy System is not just a rule—it is an essential, proactive safety strategy that empowers children to look out for one another and holds everyone accountable for collective well-being.

In witness whereof, the parties named above have duly executed this instrument as of the Effective dates.



Las Vegas Little League Board of Directors

(President and Safety Officer Signature Required)

Approved by:

A handwritten signature in black ink, appearing to read "Steven Gonzales".

Steven Gonzales, LVLL President

A handwritten signature in black ink, appearing to read "Adrian Jaramillo".

Adrian Jaramillo, LVLL Safety Officer

Tanya Arrellin, LVLL VP/ Treasurer

Tim Olivas, LVLL Coaching Coordinator

Brandy Garcia, LVLL Secretary/ IO

Ray Arrellin, LVLL Field Maintenance

Jasmin Ramirez, LVLL Player Agent

James Lopez, Building & Property Manager