



Commerce Little League

A Safety Awareness Program

Safety Plan: 2020

League ID: 122-04-14



Commerce, Michigan



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1.0 Mission Statement

Commerce Little League is a non- profit organization run by volunteers for the benefit of “all” children within, and part of; the surrounding commerce township community. We strive to provide a safe place and friendly environment for the children to learn the game of baseball.

2.0 Safety Statement

Commerce Little League has developed this Safety Plan to help with our Mission of providing a safe place and friendly environment for the children to learn the game of baseball.

3.0 Safety Plan

- *Our written Safety Plan is kept on file with the Commerce Little League Safety Officer and another copy is sent to the District Safety Officer of South West Oakland Baseball.*
- Commerce Little League will print and distribute the safety plan to be kept and posted in the concession and equipment building for all volunteers.
- Commerce Little League will also post the Safety Plan on the league website to provide an easy access for all at
- www.commercelittleleague.com



4.0 Emergency Numbers

4.1 Emergency Numbers:

- 4.1.1 9-1-1 (Emergency Service)
- 4.1.2 Commerce Township Police (non- emergency)____(248) 858-4950
- 4.1.3 Commerce Township Fire Department____(248) 363-2641
- 4.1.4 Poison Control Center____1-800-Poison-1

4.2 Board of Directors (Key Contacts)

President	Steve Atwell	teamatwell04@gmail.com
VP	Jason Vassas	avgjay@yahoo.com
Safety Director	Mike Smith	msmithallprodad@sbcglobal.net
Registrar	Paul Theriault	paul.theriault@plantemoran.com
Field Director	Jim Theriault	JimTheriault1@gmail.com

4.3 DMC Huron Valley – Sinai Hospital (248) 937-3300

4.3.1 Address:

1 Williams Carls Dr. Commerce

4.3.2 Driving Directions:

1. Start out going EAST on GLENGARY RD toward TALL PINES WAY. (0.59 miles)
2. Turn LEFT onto BENSTEIN RD. (2.18 miles)
3. Turn RIGHT onto SLEETH RD. (0.35 miles)
4. Turn LEFT onto WILLIAM CARLS DR. (0.05 miles)
5. End at 1 William Carls Dr Commerce Township, MI 48382

4.3.3 Total Estimated Time: 5 minutes

4.3.4 Total Distance: 3.17 miles

4.4 Henry Ford Hospital Emergency (248) 661-6450

4.4.1 Address:

6777 W. Maple Road between Drake & Halsted

4.4.2 Driving Directions:

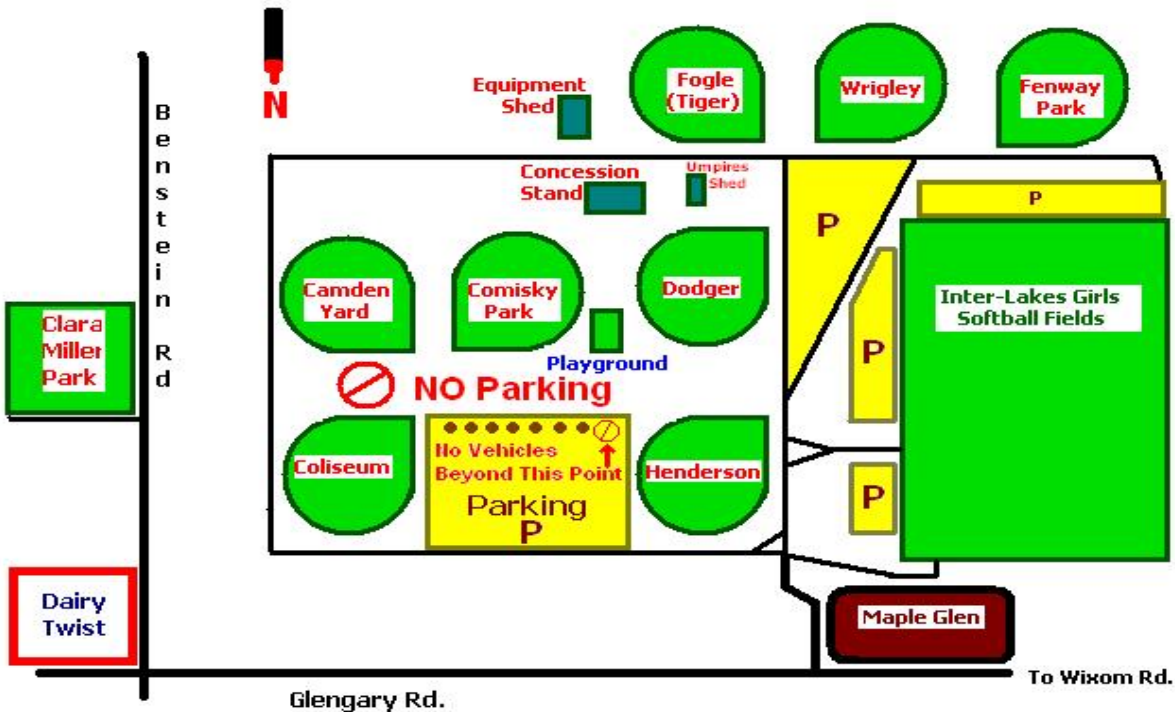
1. Start out going EAST on GLENGARY RD toward TALL PINES WAY. (2.11 miles)
2. Turn LEFT onto S COMMERCE RD. (0.50 miles)
3. Turn RIGHT onto E OAKLEY PARK RD. (1.77 miles)
4. Turn RIGHT onto HAGGERTY RD. (2.07 miles)
5. Turn LEFT onto W MAPLE RD. (1.45 miles)
6. End at 6777 W Maple Rd West Bloomfield, MI 48322

4.4.3 Total Estimated Time: 14 minutes

4.4.4 Total Distance: 7.90 miles

5.0 Field Map, Evacuation Plan, Tornado Safety

5.1 CLLB Field Map (Maple Glen Park)



5.2 Maple Glen Park Polices:

5.2.1 Parking

Parking is Only Allowed in the Designated Parking Areas.

There is NO PARKING on the Grass South of the Vertical Wooden Posts at the Southern End of the Parking Area located between Henderson and Coliseum Fields. (See Map Above).

Games will not be started if a Vehicle is parked in this Area.

Also, If Games are in progress on Camden, Comiskey, or Coliseum Fields and a Vehicle enters this area, the Umpires will STOP the games until the vehicle is moved to the Parking Area.

5.2.2 Speed Limit

5 MPH - This is For the Safety and Well-Being of All Players and Fans Attending CLLB Games.



5.2.3 Smoking

Please Note that Smoking IS NOT Permitted in the Bleachers, BEHIND the Bleachers, BEHIND the Backstops, or ANYWHERE Near the Fields.

5.3 Evacuation Plan

Evacuation Plan:

Severe storms, lighting, fire or tornado are “all” possible natural weather conditions which may require an expedient evacuation plan. As a result, Commerce Little League has developed the following Evacuation Plan: A functioning air horn will be maintained in the umpire’s shed. If lightning is seen, thunder is heard or an immediate **emergency** should arise that would require expedient evacuation, the horn can be used to signal the need to clear the fields. In cases of obvious thunder or lightning the fields will be cleared and the use of the horn is not necessary.”

- The manager or the division director will provide guidance relative to shelter or parent notification for evacuation as defined in the CLLB safety rules. When in doubt, the manager should always direct players and families towards the side of caution, until weather or other situations are evaluated or assessed.
- NOTE: Dugouts, concession stand, umpire shed, and equipment sheds are not acceptable shelters. Shelter should be taken in vehicles.
- At the time of severe weather or other conditions, and if the evacuation horn has not sounded for immediate dismissal, the manager will gather “all” players together and direct them towards their parents until they arrive. Under no circumstance should a child be left unattended.
- The manager will be responsible for a player, until that child’s parent or guardian arrives.
- No one is allowed to return to the field until 20 minutes following the last visible lightning or audible thunder.
- Once parents have retrieved their children, they will proceed slowly and cautiously out of the Maple Glen facility, observing the 5 mph speed limit.
- The Umpire Director will go over these evacuation procedures “*annually*” with the players and families in attendance, during opening day ceremonies. In addition, these procedures will be discussed with all managers during their annual safety training.



5.4 Tornado Safety

- Tornadoes are frightening realities. We can't prevent them or even predict where or when they will strike. Many of us aren't sure what we should do during a tornado. Some people aren't even clear about the difference between a tornado "watch" and a tornado "warning." But there are some precautions we can take to minimize danger - to people and property. When tornado season approaches, the watchwords are: Be informed and be prepared. Knowing the difference between a watch and a warning is a good first step:
- **A TORNADO WATCH** simply means that conditions are favorable for tornadoes to develop. In this case you should take precautions to protect you and your property, and listen to the radio to keep informed. Tornadoes are most likely to occur in the late afternoon on a hot spring day. However, tornadoes have occurred in every month at all times of the day or night. When a tornado "watch" is issued, be alert for changes in the weather. Be prepared to act quickly.
- **A TORNADO WARNING** means that a tornado has actually been sighted. If one is issued for your area, you should seek shelter immediately! There is little time for closing windows or hunting for a flashlight. It's a good idea to know where things are, and to have an emergency storm kit already prepared.
- Separating fact from myth can mean the difference between injury and safety in the case of a tornado. The boxes below present the truth about four of the most common and dangerous "Tornado myths."
- **Before the storm hits...**
- A little planning can prevent unnecessary panic and confusion if a tornado does strike.
- Learn the warning signals used in your community. If a siren sounds, that means STAY INSIDE and take cover.
- **When a tornado warning has been issued on the radio or by siren...**
- **Seek shelter immediately.**
- **At the fields:** Make sure all of the children on your team have been accounted for. Do not allow anyone to remain on the fields. Take immediate shelter at the lowest nearby area: lying flat on the ground and securing any nearby children to the best of your ability. Do not allow the children to wait the tornado out in an automobile.

In cars: Leave the vehicle. Seek a safe structure or lie down in a low area with your hands covering the back of your head and neck. Keep alert for flash floods that often accompany such storms.



6.0 Safety is a Team Effort

The following are general safety points that should be observed by all **(players, coaches, managers and spectators)**:

- Walk through the parking lot and “**not**” between parked cars.
- Although fencing is in place to shield spectators, be aware of foul balls while attending games or practices at the Maple Glen fields. (*please take notice of the **foul ball area** signs.*)
- If anyone is injured by a foul ball, immediately treat any injuries and file an incident report as soon as possible (these can be found with each coach, a board member or in the file cabinet in the umpire’s shed.) Return completed incident forms to a member of the Board of Directors immediately or to the Safety Director’s file cabinet in the umpire’s shed. Refer to the first aid kit manual provided in the first aid kit for specific situations.
- Cars should “**not**” be parked as to damage any area of the Maple Glen fields or to block exits and entrances to any of the fields.
- No climbing on fences or trees.
- An adult should supervise and oversee any children playing in the slide and jungle gym play area.
- Litter should be disposed in the garbage bins adjacent to the fields.
- Alcohol and drugs are strictly **prohibited** on the Maple Glen premises.
- Smoking is **prohibited** on the playing fields, in the bleachers and the surrounding areas. (*please observe the no smoking signs and be courteous towards others.*)

Any suggestions for general safety improvements may be directed in person, in writing or through e-mail to any of the Commerce Little League Board of Directors via our website at: www.commercelittleleague.com

The following are safety points that should be enforced by the **coaches and managers**:

- Commerce Little League will distribute a first aid kit to every team manager at the beginning of the season. This first aid kit must be brought to every baseball practice and game. The Safety Director may perform safety checks throughout the season to confirm that the first aid kits are on the bench. Refillable supplies and additional first aid kits are available in the file cabinet in the umpire shed or from the Safety Officer directly.
- Each manager will collect a Medical Release Form each player which contains family physician, player allergies or medical conditions and the phone numbers for emergency contacts.
- It is recommended that each team have extra bottles of water on hand at each practice or game.
- Instant Cold Packs will be provided to all managers as part of their First Aid Kits. Simply bend and snap the packet and the contents of the package will become an instant cold compress for any immediate contusion or medical condition.
- Have a cell phone available at every practice and game in the event of an emergency along with the emergency phone numbers for each player.
- Both managers are required to check the field before each game for holes, damaged bases, stones, unstable pitcher’s mound, and



other foreign objects. In addition, the managers will confirm if the field has been raked after the prior game (or before the start of the first days' game – *Home Team* is responsible.)

- Check the player's equipment for any wear, tear or damage (refer to the "pre-game safety check list".) If damaged equipment is found, bring it to the attention of the Equipment Manager (if unavailable then the Division VP), so it can be replaced and disposed of properly. The league will replace or repair any damaged equipment as needed. Ongoing inspection of team equipment allows for proper disposal and replacement of items in-use; as well as, the necessary timeline to order new equipment. Items that will improve safety will be evaluated each year and added to the annual budget.
- All players must wear Little League approved helmets bearing the NOCSAE symbol during any Commerce Little League activity. Kid base coaches must wear helmets. Batters and base runners must wear Helmets, with chin straps recommended. Batting/catcher's helmets should ***not*** be painted unless approved by the manufacturer.
- Only Little League regulation baseballs may be used during these games. Tee Ball will use R.I.F. 5 balls.
(*official baseballs are provided by the league.*)
- Stretch the players properly before each practice and game so as to avoid injury.
(*see suggested warm- up stretches .*)
- Head first slides are not permitted, except when the runner is returning to a base
- All gates providing entrance onto a playing field should be secured during the course of a game.
- All male players are required to wear an athletic supporter and protective cup.
- All catchers are required to use a catcher's mitt and wear properly fitting, brand name or official supplier catchers equipment, NOCSAE approved, and/or licensed Little League approved catchers gear (i.e., helmet, face mask, dangling throat protector, long chest protector with neck guard, shin guards and athletic supporter with protective hard cup – typically made of molded plastic.) In addition, any player that warms- up a pitcher during game play or while in the bull pen area must wear a facemask.
- Female catchers need to wear the same (as above) with the exception that the chest protector may be long or short. ***No skull cap catcher helmets are allowed.***
- All players are to wear *non-metal cleats with the exception of Junior Division.*



- Players are **not** to wear jewelry or other metal items during the game (unless it is needed for medical awareness.)
- Only have players warm up pitchers. **THIS IS A LITTLE LEAGUE RULE 3.09 AND MUST BE FOLLOWED.** (Coaches, managers, and parents are not allowed to warm up pitchers during games). Warm up catchers are only required to wear a helmet and facemask during the warm up. The league has provided each team with an extra helmet and catcher's facemask just for this reason.

Warm up amendment (4/29/03)

Due to concern for potential delay of baseball games, the following amended rules may be used in the Pee Wee, Minor, Major and Junior Divisions:

SITUATION #1:

"If the catcher of record is on base with two outs, the team manager has the option to substitute the catcher with a courtesy runner. Said courtesy runner is designated as the last out of that inning."

SITUATION #2:

"If the catcher scheduled for the next inning is on base with two outs in the inning, the team manager has the option to substitute the catcher with a courtesy runner. Said courtesy runner is designated as the last out of that inning. To use this situation, the manager must notify the umpire and other manager of his intent to invoke this rule at the beginning of the inning."

- Pitchers are to be warmed up on the field between the foul line and the fence. They are to be protected by a player or coach from the team.
- On-deck batters are **not** allowed to practice swings inside the field fences **or** outside the field/dugout area. ***No player should handle a bat, even while in an enclosure.***
- No bat weights (to include doughnuts or weighted sleeves) are allowed on the field, nor is the use of two bats for warm-up.
- No throwing of baseballs allowed directly in front of or behind bleachers.
- Players are to remain on the field of play or in the dugout during the entire game with their attention on the game.
- Only individuals authorized by the Commerce Little League Board of Directors are allowed to assist teams at any time (refer to volunteer form process.)
- **Have foul balls returned to the dugouts only, not onto the field of play at any time.** Players should only retrieve balls that are within the field of play.
- In the event of inclement weather the highest ranked umpire Present and members of the Board of Directors that are present



- Have the right to delay, postpone, or cancel baseball games.
- Commerce little league has developed an evacuation plan that involves coach and board level communication; as well as, rapid evacuation due to severe conditions (see **page #7** in the safety manual.)
 - Dugouts should be cleared of all trash and debris after each game
 - An AED will be available at Maple Glen Park in the event of a cardiac emergency.
 - During practice and games, all players should be alert and watching the batter on each pitch.
 - During warm-up drills players should be spaced so that no one is endangered by wild throws or missed catches.
 - Player must not wear watches, rings, pins or metallic items during games and practices.
 - Parents of players who wear glasses should be encouraged to provide “safety glasses.
 - Coaches instruct your players about Bicycle safety (i.e., wear helmet, stay off busy roads, ride with traffic, don’t dart between cars & be aware!
 - All pre-game warm-ups should be performed within the confines of the playing field and not within areas that are frequented by, and thus endanger spectators (i.e., playing catch, pepper, swinging bats, etc.)
 - All team equipment should be stored within the team dugout, or behind screens, and not within the area defined by the umpires as “in play”.
 - Only players, managers, coaches, and umpires are permitted on the playing field or in the dugout during games and practice sessions.
 - Responsibility for keeping bats and loose equipment off the field of play should be that of a player assigned for this purpose or the team’s coaches. *(bat racks are permanently installed in each dugout for this purpose.)*

Safety is a “Team” Effort



7.0 Code of Conduct

CLLB Code of Conduct Requirements

7.1 Coach and Manager Code of Conduct Page 15-
16

7.2 Parent Code of Conduct Page 17

7.3 Code of Conduct for BOARD MEMBERS Page 18-
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Commerce Little League's Coach and Manager Code of Conduct

I, _____ (print name), understand that being a Commerce Little League coach or manager is a privilege. This privilege requires managers and coaches to conduct themselves in a proper manner. I understand that my purpose is to provide an enjoyable and instructive atmosphere for all involved. I also understand that this privilege **does not** allow me the right to:

- Use foul language, actions or derogatory or demeaning comments towards any players, umpires, spectators, opposing coaches or opposing managers,
- Knowingly use illegal baseball equipment, lineups, drafting practices, etc.,
Use unsafe baseball equipment (i.e. batting helmets that do not fit, catcher's throat protectors that are not safely secured, shin pads that do not fit properly, etc.),
- Continually mingle or fraternize with spectators during the game or incite spectators to harass the umpire (s) during or after the game,
- Smoke during the game.

I understand that any action considered illegal or inappropriate by the umpire(s) and/or a member of the Board of Directors could result in:

- A verbal warning by the umpire to myself, the offending player or spectator,
- A second warning will result in removal from the game, including immediate leave from the field and surrounding stands. If ejected from a game, I understand that I cannot manage/coach my team's next game (rain outs not included) and will be required to provide two hours of community service as decided by the Board of Directors,
- If inappropriate activity continues, the Commerce Little League Board of Directors can vote to have me removed from my position as manager or coach of my baseball team for as long as they see fit.



I understand my goal as a manager or coach includes:

- Assisting the baseball players with the fundamentals of the sport while always looking out for their safety. As such, at least one manager or coach of my team must have documented attendance at the safety course provided by the Commerce Little League, along with receipt of their safety manual and any handouts the Safety Officer feels is of importance to my players' well-being.
- Teaching good sportsmanship, ensuring that the kids have fun and experience the joy that comes from playing a team sport regardless of the outcome.
- Encouraging those involved to help others,
- Ensuring a safe environment.

Another part of this responsibility is assignment of an inventoried bag of baseball equipment along with a first aid kit. I will be required to sign an inventory sheet for the equipment provided to me. In the event I fail to return all or a portion of the bag's contents then Commerce Little League will purchase replacement gear and the cost will be billed to me. I understand that failure to pay billed cost by designated due date may result in my inability to partake in any future Commerce Little League events. In addition, the League will sternly address any lack of compliance with a past due balance in order to rectify the outstanding cost. I understand that any equipment that is damaged during the regular season should be returned to the Equipment manager immediately for the safety of the players and for replacement.

If I am unable to fulfill this position or any part of it I will ask for assistance from the Commerce Little League Board of Directors, fellow coaches and managers or others as authorized by the Commerce Little League Board of Directors.

I understand and agree to the above and want to be a constructive, positive, and reinforcing part of the Commerce Little League Baseball organization.

Signature

Date



Parent Code of Conduct

*I hereby pledge to provide positive support and encouragement for my child participant in the Commerce Little League program by following this **Code of Conduct**.*

- I agree that my role as a parent/guardian is critical to the success of the Commerce Little League program and to the team.
- I agree to not force my child to participate in sports.
- I agree to inform the coach of any physical disability or ailment that may affect the safety of my child or the safety of others.
- I agree to cheer and support good team play, and I will not be overly concerned with the outcome of the game.
- I agree to have my child on time to practices and games and to pick up my child on time.
- I agree to understand team rules, discipline and technique corrections of players as part of the game.
- I agree to discuss with my child the importance of safety and will support the discipline of the League and its staff regarding temper tantrums, unsafe practices, and paying attention at all times.
- I agree to let the coaches do the coaching and will refrain from coaching any player except to provide encouragement.
- I agree to respect coaching decisions regarding playing time, position, and placement.
- I agree to accept umpire decisions and understand that verbal abuse or harassment of umpires is detrimental to my child, the team, and the League. I further understand that verbal abuse or harassment may be grounds for my removal from games.
- I agree to be a positive role model for my child and will not engage in public displays of anger.
- I agree to display good sportsmanship by respecting opposing fans, coaches, and participants.
- I agree to show compassion to an injured player and applaud positive performance. I will not heckle, jeer, or distract players, and I will avoid use of profane and obnoxious language and behavior.
- I agree to censure those whose behavior is unbecoming.
- I agree to accept responsibility for guests that I bring to games and to ensure that they follow the guidelines set forth in this document.
- I agree to provide a sports environment for my child that is free from drugs, tobacco, and alcohol, and I will refrain from their use at all sports events.
- I agree to not approach players or coaches before, during, or immediately after games with anything other than congratulations. All questions and concerns regarding players, coaches, or umpires should be addressed the day after the game in an atmosphere conducive to problem solving.
- I agree to file in writing with the League Board of Directors complaints regarding violation of rules, questionable conduct, irreconcilable personality conflicts or abusive behavior by a player, coach, umpire, or fan. I understand that this is the League procedure for dealing with negative or emotional issues regarding the program and participants.

Signature

Date



SOUTHWEST OAKLAND BASEBALL / COMMERCE LITTLE LEAGUE

CODE OF CONDUCT POLICIES FOR BOARD MEMBERS

Southwest Oakland Baseball/Commerce Little League (CLL) has adopted the following Code of Conduct that all Board members, agree to adhere to by signing below:

1.) Prohibition Against Private Inurement and Procedures for Managing Conflicts of Interest

No member of the Board of Directors shall derive any personal profit or gain, directly or indirectly, by reason of his or her service as a Board member of CLL. Members of the board shall conduct their personal affairs in such a manner as to avoid any possible conflict of interest with their duties and responsibilities as members of the Board. Nevertheless, conflicts may arise from time to time.

- a) When there is a decision to be made or an action to be approved that will result in a conflict between the best interests of CLL and the Board member's personal interests, the Board member has a duty to immediately disclose the conflict of interest so that the rest of the Board's decision making will be informed about the conflict.
- b) It is every Board member's obligation, in accordance with this policy, to ensure that decisions made by the Board reflect independent thinking. Consequently, in the event that any Board member receives compensation from CLL such compensation will be determined by and approved by the full Board in advance.
- c) Any conflicts of interest, including, but not limited to financial interests, on the part of any Board Member, shall be disclosed to the Board when the matter that reflects a conflict of interest becomes a matter of Board action, and through an annual procedure for all Board members to disclose conflicts of interest.
- d) Any Board Member having a conflict of interest shall not vote or use his or her personal influence to address the matter, and he or she shall not be counted in determining the quorum for the meeting.
- e) All conflicts disclosed to the Board will be made a matter of record in the minutes of the meeting in which the disclosure was made, which shall also note that the Board member with a conflict abstained from the vote [and was not present for any discussion, as applicable] and was not included in the count for the quorum for that meeting.
- f) Any new Board member will be advised of this policy when elected and all Board members will be reminded of the Board Member Code of Conduct and of the procedures for disclosure of conflicts and for managing conflicts on a regular basis, at least once a year.
- g) This policy shall also apply to any Board member's immediate family or any person acting on his or her behalf.

2. Prohibition Against Sexual Harassment



CLL strives to maintain a workplace that is free from illegal discrimination and harassment. While all forms of harassment are prohibited, it is the organization's policy to emphasize that sexual harassment is specifically prohibited. Any board member who engages in discriminatory or harassing conduct is subject to removal from the Board. Complaints alleging misconduct on the part of Board members will be investigated promptly and as confidentially as possible by the Board President.

3. Confidentiality

Board members are reminded that confidential financial, personnel and other matters concerning the organization, donors, sponsors, staff, players, parents or clients/consumers may be included in board materials or discussed from time to time. Board members should not disclose such confidential information to anyone. This includes all emails, addresses, phone numbers and other contact information, as well as medical information, social security numbers, credit card, bank account and other private/personal information. Board members will not attempt to contact or recruit CLL parents, players or families for business purposes, other than those of CLL.

4. Active Participation

Board members are expected to exercise the duties and responsibilities of their positions with integrity, collegiality, and care. This includes:

- ☐ Making attendance at all meetings of the board a high priority.
- ☐ Being prepared to discuss the issues and business on the agenda, and having read all background material relevant to the topics at hand.
- ☐ Cooperating with and respecting the opinions of fellow Board members, and leaving personal prejudices out of all board discussions, as well as supporting actions of the Board even when the Board member personally did not support the action taken.
- ☐ Putting the interests of the organization above personal interests.
- ☐ Representing the organization in a positive and supportive manner at all times and in all places.
- ☐ Showing respect and courteous conduct in all board and committee meetings.

I, _____, recognizing the important responsibility I am undertaking in serving as a member of the Board of Directors of CLL, hereby pledge to carry out in a trustworthy and diligent manner the duties and obligations associated with my role as a Board member and abide by this Code of Conduct. I understand that failure to abide by this Code of Conduct may result in my removal as a Board Member, pursuant to the requirements and processes provided in the organization's governing documents.

Signature

Date



8.0 Volunteer Application Process

8.1 Commerce Little League Volunteer Application Process

Since the importance of our children's existence lies in our own hands, so does their safety to move forward in life. The seriousness of this is an issue that is not and can never be taken lightly. Because of this and because of the changing world we live in, it has become necessary for **any individual that will be taking any active role in the Commerce Little League** to complete and submit a Volunteer Application prior to involvement with the league. This application must be accompanied by a copy of a valid driver's license and submitted to the Board of Directors before the individual is allowed to participate in League activities.

The process is as follows:

1. Current year volunteer applications are completed at the 1st board meeting, baseball registrations, coach/manager meetings, or at any point that an individual chooses to actively partake in the Commerce Little League. The completed application (see [page #22](#)) must be accompanied by a copy of a **valid driver's license** in order to be submitted for review by the President / VP / Safety Director. See [page #18-22](#) for Q&A
2. The President completes background checks on each applicant by way of state websites, Sex offender websites, or any other means deemed sufficient to verify the legitimate background of an individual.
3. Once a background check is completed, a detailed printout is generated and retained for the files noting time of search, date of search, person who did search and outcome.
4. In the event an individual's background check is felt to be unsafe for their involvement with the Commerce Little League, the President, Vice President, and Registrar will address and deal with the findings.
5. All approved applications are to be retained by the Commerce Little League president for a matter of **one** year. Each application and copy of driver's license will be shredded by the president of the league at the completion of the season.
6. Each year, regardless if an individual had volunteered the year prior or not, every volunteer is to complete a new volunteer form for review.
7. Each division VP will be provided with a list of volunteers cleared for each team in their division. They will be required to do spot checks during the season to assure that only those pre-approved by Commerce Little League are involved with the players. In the event an individual is found active with the players but has not completed a volunteer application for review, the manager will be fined and possibly subjected to community service or a game suspension (per Board of Directors).
8. Each coach and manager is also required to complete and turn in a Signed "Code of Conduct" (see [page #14-15](#) of CLLB safety manual). Once signed, the original is placed with the volunteer application and retained by the president for a matter of one year. A copy of the "Code of Conduct" is returned to the individual whom signed it for their future reference. The "Code of Conduct" is only valid for one year and must be newly completed each year.



8.2 Questions and Answers about the Child Protection Program:

1. What do we, as a league, have to do to comply so that we can be chartered for the next season?

Effective in 2007, the local league must conduct a nationwide search that contains the applicable government sex offender registry data. A check conducted only in one state no longer meets the minimum requirements of the regulations. The local league has been and is required to have all board members, managers, coaches, and other volunteers or hired workers who provide regular service to the league or/and who have repetitive access to or contact with players or teams fill out the new volunteer application. Additionally, the league has been and is required to conduct a background check on each of these individuals. Little League Baseball and Softball will require each league to sign an agreement on the charter application that they will comply with Regulations I(b) and I(c) 8 & 9. The leagues are also required to sign a statement on the tournament enrollment form verifying that the process under the regulations has been completed and implemented. Failure to sign the agreement on the charter application will result in the league not being chartered and failure to fulfill the requirements of the regulations will result in the league's status being referred to the Charter/Tournament committee for action to revoke the league's charter and all privileges.

2. What type of background check is required by the new regulations?

Since 2003, Little League Baseball and Softball regulations have required each local league to check the Sexual Offender Registry (SOR) in the state where the applicant resides. Where the Sexual Offender Registry is not available, then these leagues must do a criminal background check. However, local leagues may elect to conduct a criminal background check, which exceeds the minimum requirement by the new regulations. For example, a background screening through the Federal Bureau of Investigation.

3. What type of offenses are we screening for when we conduct a background check?

Local leagues are conducting a search of the government nationwide Sexual Offender Registry for anyone who has committed sexual offenses involving minors. An individual who has been convicted or plead guilty to charges involving or against a minor, no matter when the offense occurred, must not be permitted to work with children.



4. Who in the local league should be responsible to process the background check information?

Little League Baseball and Softball recommends the board of directors appoint the local league president and two other individuals to handle the background checks. These individuals may be from the board or individuals outside the board. For instance, the board of directors may appoint individuals who have significant professional background in this area, such as law enforcement officers or individuals with a legal background.

5. What if an individual has previously had a background check?

Each league ***must*** conduct their own background check on the appropriate individuals annually. At a minimum, leagues must use the Department of Justice's free website: <http://www.nsopr.gov>

6. If our volunteer base comes from multiple states, in what state do we do the background checks?

Many leagues are located close to the boundaries of other states; these leagues must conduct the background check where the individual resides. The league must attach a copy of a government-issued photo identification to the volunteer application. The residence on the government document will determine where the check must be conducted. An option is to check on

<http://littleleague.choicepoint.com> or through
<http://www.littleleague.org/common/childprotect/states.asp>

Searches done through Choicepoint provide access to a nationwide database and satisfy all Little League requirements for background checks. Each search costs \$1.50. For more detailed information, refer to the Little League web site.

7. What will result in termination of a volunteer under these regulations?

Any background check that reveals a conviction of any crime involving or against a minor must result in immediate termination from the league. Additionally, volunteers who refuse to submit a fully completed Little League Volunteer Application, along with a government issued photo ID, must be immediately terminated or eliminated from consideration for any position. This includes individuals with many years of service to your league.

8. What if offenses involving or against minors are pending prior to or after appointment to a position in the local league?

We suggest the individual not be appointed or should be suspended from his/her current position pending the outcome of the charges.

9. What if there are convictions or other offenses NOT involving or against minors?

A local league may prohibit any individual from participating as a volunteer or hired worker, if the local league board of directors deems the individual unfit to work with minors.



10. Who is to be made aware of the information found on the background check?

The local league president shall only share personal information contained in the volunteer application, background check or other information obtained through the screening process with other members of the board of directors in order to make personnel decisions. If the information obtained through the background check is public record and causes an individual to not be appointed or to be terminated, Little League Baseball and Softball recommends this information be shared with the parents/guardians of the children who have had contact with the individual previously.

11. Where should these records be maintained and for how long?

The local league president shall retain each volunteer application, background check information, and any other documents obtained on file for the current year of service of that individual. After the local league has completed operation for the current season, the league president shall dispose of the records unless the league has taken action or made a decision based upon the information contained in the records.

12. What is the timetable for completing the screening of each individual?

The local league must complete the annual screening process prior to the individual assuming his/her duties for the current season. This would include the individual submitting a signed, completed volunteer application, along with a government issued photo ID, and the league completing an appropriate background check.

13. What resources are available through Little League Baseball and Softball to assist in this process?

Leagues can obtain the current volunteer application and background check information for each state through the Little League website at www.littleleague.org. The information on the Little League website contains links directly to state government resources on conducting background checks. Little Leagues are also encouraged to use whatever local resources are available in their communities.

14. What will it cost my league to implement this initiative?

Commerce Little League is conducting the background checks through First Advantage at a cost of \$1.25 per check after an initial 125 checks for free. Background check info can be obtained at www.littleleague.org.

15. Where can I find funding assistance to pay for the background checks if necessary?

The league may elect to seek other funding sources from local businesses, sponsors, civic organizations and service clubs.



16. When should local leagues begin the implementation process of this initiative?

Immediately, so volunteer applications and background checks are completed prior to individuals assuming their duties for the current season.

17. Does this initiative also apply to those individuals that assist the manager and coaches at practices or games?

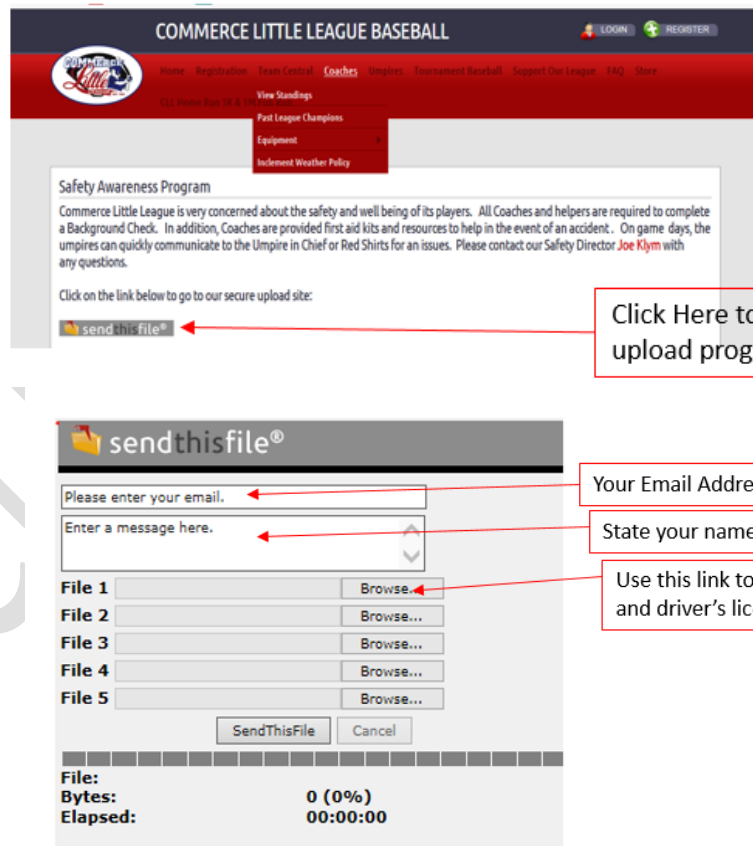
Yes. Any individual who provides regular service to the league or/and who has repetitive access to or contact with players or teams must fill out the Volunteer Application, provide a copy of a government issued photo ID, and go through the background check process. This is an example of the revised mandatory Little League Volunteer Application. A version that can be filled out electronically and printed from your computer is available at:

<http://www.littleleague.org/common/forms/volunteerapp.pdf>

8.3 Upload Application Procedure

1. All CLLB Board Members and hired employees are required to submit a volunteer application yearly.
2. Once Managers / Head Coaches have been approved by the CLLB, the Manager / Head Coach will provide a list of assistant coaches to the Division Director.
3. The Division Directors will supply the Safety Director the list of managers / coaches requiring background checks.
4. Applications found on page 25 can be printed off / filled out completely by the Manager / Head Coach and all the Assistant Coaches.
5. The complete documents can be uploaded to the secure upload website along with a copy of the applicants driver's license with the following link:

<http://www.commercelittleleague.com/Default.aspx?tabid=837043>



The image shows two screenshots. The top screenshot is of the Commerce Little League Baseball website. The navigation bar includes links for Home, Registration, Team Central, Coaches, Umpires, Tournament Baseball, Support Our League, and FAQ. A red box highlights the 'Coaches' link. Below the navigation bar, there is a 'Safety Awareness Program' section with text about background checks and a link to a secure upload site. A red arrow points from a text box to the 'sendthisfile' link. The bottom screenshot is of the 'sendthisfile' upload interface. It has a form with fields for 'Please enter your email.' and 'Enter a message here.'. Below these are five file upload slots, each with a 'Browse...' button. A red arrow points from a text box to the first 'Browse...' button. At the bottom of the form are 'SendThisFile' and 'Cancel' buttons. A progress bar at the very bottom shows 'File: 0 (0%)' and 'Elapsed: 00:00:00'.

Click Here to access the upload program

Your Email Address

State your name / division / team

Use this link to attach application and driver's license



Little League® Volunteer Application - 2020

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

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

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

Name First Middle Name or Initial Last Date

Address

City State Zip

Social Security # (mandatory)

Cell Phone Business Phone

Home Phone: E-mail Address:

Date of Birth

Occupation

Employer

Address

Special professional training, skills, hobbies:

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

Previous volunteer experience (including baseball/softball and yes):

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

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

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

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

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

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

7. Have you ever been refused participation in any other youth programs? Yes ☐ No ☐
If yes, explain:

In which of the following would you like to participate? (Check one or more.)

- ☐ League Official ☐ Umpire ☐ Manager ☐ Concession Stand
☐ Coach ☐ Field Maintenance ☐ Scorekeeper ☐ Other

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

Name/Phone

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

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

Applicant Signature Date

If Minor/Parent Signature Date

Applicant Name (please print or type)

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

LOCAL LEAGUE USE ONLY:

Background check completed by league officer on

System(s) used for background check (minimum of one must be checked):

Regulation 1(c)(9) Mandates all checks include criminal records and sex offender registry records

* JDP ☐ Sex Offender Registry Data and National Criminal ☐

Records check, as mandated in the current season's official regulations

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

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



9.0 A Parent's Guide to the Little League Child Protection Program

9.1 Introduction

The backbone of Little League Baseball is the adult volunteer. One million strong, it is this corps of dedicated people who coach the teams, umpire the games, work in the concession stands, serve on the local board of directors, and serve at the District level. These people, who live in every U.S. state and more than 100 other countries, make Little League the world's largest and most respected youth sports organization.

We know that the greatest treasure we have is children. As adults, we must ensure that these young people are able to grow up happy, healthy and, above all, safe. Whether they are our children, or the children of others, each of us has a responsibility to protect them.

The Little League Child Protection Program seeks to educate children and volunteers in ways to prevent child abusers from becoming involved in the local league. Part of that education has been to assist local Little League volunteers in finding effective and inexpensive ways to conduct background checks. Little League regulations now say: "No local league shall permit any person to participate in any manner, whose background check reveals a conviction for any crime involving or against a minor." (Reg. I [c] 9.)

Background checks were optional until the 2003 season. Recent advances in computer technology – allowing greater access to public records – make it possible for background checks (at a minimum, to see if an individual is a registered sex offender in a given state) to be conducted in every U.S. state. Local Little League programs are now **required** to annually conduct a background check of Managers, Coaches, Board of Directors members and any other persons, volunteers or hired workers, who provide regular service to the league and/or have repetitive access to, or contact with, players or teams. (Reg. I [b], Reg. I [c] 9.)

The purpose of these background checks is, first and foremost, to protect children. Second, they maintain Little League as a hostile environment for those who would seek to harm children. Third, they will help to protect individuals and leagues from possible loss of personal or league assets because of litigation.

In more than 40 states, a check of the state's sex offender registry is free. In others, there is a nominal fee per person. Parents have a right to know that the leadership of their child's local Little League conducted the mandatory background check on everyone required. Whatever the cost, the local league cannot afford to ignore this new regulation. In fact, compliance is a condition of membership in Little League.

9.2 What Can Parents Do?

Most children have been warned about the dangers of talking to strangers. But for many children, sexual molestation is committed by someone they know. In fact, 80 to 85



percent of all sexual abuse cases in the U.S. are committed by an individual familiar to the victim, according to statistics compiled by Big Brothers & Big Sisters of America. The truth is, child sex offenders can come from every background, every occupation, every race, and every level of education. They may be married, and they may have children of their own. It is dangerous to believe that the only threat is the stranger in a long raincoat, lurking behind a tree.

In fact, the promotion of this myth may contribute to the problem. Sometimes, a child who is molested by a known and “trusted” person will feel so guilty about not reacting the “right” way that he or she never reports the problem.

Sadly, we have all seen too many reports in which teachers, police officers, clergy, youth sports volunteers, etc., trusted by all, have violated that trust and molested children in their care. Of course, this must never be tolerated in Little League or anywhere else.

In many of these situations, the young victims are actually seduced, sometimes over a period of months or even years. The child’s family is lulled into believing the unusual attention being lavished is a bond of friendship between the adult and the child. In fact, the adult abuser often uses gifts, trips, attention and affection as part of a courtship process. Sometimes, the courtship process extends to the child’s parent(s), but the real target is the child.

Often, but not always, the victim of this type of child sex offender is the child of a single parent. In these cases, the single parent sees the child’s adult friend as a surrogate parent – a Godsend. The very opposite is true.

Two good rules of thumb for all local Little Leagues and parents

- Generally, a person involved in a local Little League program should not put himself or herself in a one-on-one situation involving a child who is not their own. Of course, some isolated situations may arise where one-on-one situations could take place. However, a one-on-one situation should not be actively *sought out* by the adult, and should not be an ongoing occurrence.
- Generally, a person involved in a local Little League program should not provide unwarranted gifts, trips, attention and affection to individual children who are not their own. The key word is *unwarranted*.

9.3 Warning Signs of a Seducer

While it remains important to teach young children about the dangers of accepting items from strangers, or talking to them, we should all beware of the danger posed by the “seducer-type” child sex offender.

Each of the individual signs below means very little. Taken as a group, however, the signs **MAY** point to this type of child sex offender, and should be applied to anyone who has repetitive access to, or contact with, children.

- Provides unwarranted gifts, trips, affection and attention to a specific child or small group of children.
- Seeks access to children
- Gets along with children better than adults
- “Hangs around” children more than adults
- Has items at home or in vehicle specifically appealing to children of the ages they intend to molest, such as posters, music, videos, toys, and even alcohol or drugs



- Displays excessive interest in children (may include inviting children on camping trips or sleepovers)
- Single, over 25 years old (but could be married, sometimes as a “cover,” and could be any age)
- Photographs or videotapes children specifically
- Lives alone, or with parents
- Refers to children as objects (“angel,” “pure,” “innocent,” etc.)
- Manipulates children easily

Again, each of these items, by themselves, is relatively meaningless. Taken together, however, they may indicate a problem.

9.4 What to Watch For in Your Child

We’ve seen the signs that could point to a child sex offender, but what about the signs a child might display when he or she has been sexually abused or exploited? Some of these symptoms may be present in a child who has been or is being sexually abused, when such symptoms are not otherwise explainable: sudden mood swings, excessive crying, withdrawal, nightmares, bed-wetting, rebellious behavior, fear of particular people or places, infantile behavior, aggressive behavior, and physical signs such as pain, itch, bleeding, fluid or rawness in private areas.

9.5 Getting More Information

These items are meant solely as a general guide, and should not be used as the only means for rooting out child sex offenders.

Parents can access more information on child abuse through the National Center for Missing and Exploited Children (a nonprofit organization founded by John Walsh, <http://www.missingkids.com> and the National Clearinghouse on Child Abuse and Neglect Information (part of a service of the Children’s Bureau, within the Administration on Children, Youth and Families, administration for Children and Families, U.S. Department of Health and Human Services, <http://www.acf.hhs.gov>)

9.6 How to Report Suspected Child Maltreatment

The National Clearinghouse on Child Abuse and Neglect Information advises this: If you suspect a child is being maltreated, or if you are a child who is being maltreated, call the **Childhelp** - USA National Child Abuse Hotline at 1-800-4-A-CHILD (1-800-422-4453.) This hotline is available 24 hours a day, seven days a week. The Hotline can tell you where to file your report and can help you make the report. Or, for a list of states’ toll-free telephone numbers for reporting suspected child abuse, visit the “Resource Listings” section at this site:

<http://www.childwelfare.gov/responding/how.cfm>

In Michigan call 1-800-422-4453 or visit :

http://www.michigan.gov/dhs/0,1607,7-124-5452_7119_7193-15252--,00.html

9.7 Talk to Your Kids - Listen to Your Kids

It is important that you as a parent talk frankly to your children. If a child reports sexual abuse, statistics show he or she is probably telling the truth.



Unfortunately, the sexually molested child often sees himself or herself as the one “at fault” for allowing abuse to happen. Your children **MUST** know that they can come to you with this information, and that you will support them, love them, and *believe* them. If there is an allegation of sexual abuse of a minor, the crime should be reported immediately. These criminals who steal childhood **MUST BE STOPPED.**

This brochure was produced by Little League Baseball, Incorporated; P.O. Box 3485; Williamsport, PA 17701 Little League Baseball does not limit participation in its activities on the basis of disability, race, creed, color, national origin, gender, sexual preference or religious preference.



10.0 LITTLE LEAGUE PITCHING RULES – 2010 UPDATE

10.1 Regular Season Pitching Rules - Baseball

VI - PITCHERS

(a) Any player on a regular season team may pitch. (**NOTE:** There is no limit to the number of pitchers a team may use in a game.)

(b) A pitcher once removed from the mound cannot return as a pitcher. **Junior, Senior, and Big League Divisions only:** A pitcher remaining in the game, but moving to a different position, can return as a pitcher anytime in the remainder of the game, but only once per game.

(c) The manager must remove the pitcher when said pitcher reaches the limit for his/her age group as noted below, but the pitcher may remain in the game at another position:

League Age

17-18 105 pitches per day

13 -16 95 pitches per day

11 -12 85 pitches per day

9-10 75 pitches per day

7-8 50 pitches per day

Exception: If a pitcher reaches the limit imposed in Regulation VI (c) for his/her league age while facing a batter, the pitcher may continue to pitch until any one of the following conditions occurs: 1. That batter reaches base; 2. That batter is put out; 3. The third out is made to complete the half-inning. **Note 1: A pitcher who delivers 41 or more pitches in a game cannot play the position of catcher for the remainder of that day.**

(d) Pitchers league age 14 and under must adhere to the following rest requirements:

- If a player pitches 66 or more pitches in a day, four (4) calendar days of rest must be observed.
- If a player pitches 51 - 65 pitches in a day, three (3) calendar days of rest must be observed.
- If a player pitches 36 - 50 pitches in a day, two (2) calendar days of rest must be observed.
- If a player pitches 21 - 35 pitches in a day, one (1) calendar days of rest must be observed.
- If a player pitches 1-20 pitches in a day, no (0) calendar day of rest is required.

Pitchers league age 15-18 must adhere to the following rest requirements:

- If a player pitches 76 or more pitches in a day, four (4) calendar days of rest must be observed.
- If a player pitches 61 - 75 pitches in a day, three (3) calendar days of rest must be observed.
- If a player pitches 46 - 60 pitches in a day, two (2) calendar days of rest must be observed.
- If a player pitches 31 -45 pitches in a day, one (1) calendar days of rest must be observed.
- If a player pitches 1-30 pitches in a day, no (0) calendar day of rest is required.

(e) Each league must designate the scorekeeper or another game official as the official pitch count recorder.

(f) The pitch count recorder must provide the current pitch count for any pitcher when requested by either manager or any umpire. However, the manager is responsible for knowing when his/her pitcher must be removed.

(g) The official pitch count recorder should inform the umpire-in-chief when a pitcher has delivered his/her maximum limit of pitches for the game, as noted in Regulation VI (c).



The umpire-in-chief will inform the pitcher's manager that the pitcher must be removed in accordance with Regulation VI (c). However, the failure by the pitch count recorder to notify the umpire-in-chief, and/or the failure of the umpire-in-chief to notify the manager, does not relieve the manager of his/her responsibility to remove a pitcher when that pitcher is no longer eligible.

(h) Violation of any section of this regulation can result in protest of the game in which it occurs. Protest shall be made in accordance with Playing Rule 4.19.

(j) A player who has attained the league age of twelve (12) is not eligible to pitch in the Minor League. (See Regulation V – Selection of Players)

(k) A player may not pitch in more than one game in a day. (Exception: In the Big League Division, a player may be used as a pitcher in up to two games in a day.)

NOTES :

1. The withdrawal of an ineligible pitcher after that pitcher is announced, or after a warm-up pitch is delivered, but before that player has pitched a ball to a batter, shall not be considered a violation. Little League officials are urged to take precautions to prevent protests. When a protest situation is imminent, the potential offender should be notified immediately.

2. Pitches delivered in games declared "Regulation Tie Games" or "Suspended Games" shall be charged against pitcher's eligibility.

3. In suspended games resumed on another day, the pitchers of record at the time the game was halted may continue to pitch to the extent of their eligibility for that day, provided said pitcher has observed the required days of rest.

Example 1: A league age 12 pitcher delivers 70 pitches in a game on Monday when the game is suspended. The game resumes on the following Thursday. The pitcher is not eligible to pitch in the resumption of the game because he/she has not observed the required days of rest.

Example 2: A league age 12 pitcher delivers 70 pitches in a game on Monday when the game is suspended. The game resumes on Saturday. The pitcher is eligible to pitch up to 85 more pitches in the resumption of the game because he/she has observed the required days of rest.

Example 3: A league age 12 pitcher delivers 70 pitches in a game on Monday when the game is suspended. The game resumes two weeks later. The pitcher is eligible to pitch up to 85 more pitches in the resumption of the game, provided he/she is eligible based on his/her pitching record during the previous four days.

Note: The use of this regulation negates the concept of the "calendar week" with regard to pitching eligibility.



10.2 Safety: New Bases rules are in effect

- **Disengage-Able Base Rule Goes Into Effect** WILLIAMSPORT, Pa. — Local Little Leagues have until the 2008 season to install disengage-able bases for all levels of play, if they have not already done so.
- **As of the 2008 season, all fields at Maple Glen Park are equipped with Break-away bases.**
- The new rule appeared in the 2006 baseball and softball rule books of Little League:
- **Rule 1.06: Beginning with the 2008 season, it will become mandatory that all leagues utilize bases that disengage their anchor. Leagues are encouraged to begin the process of implementing these types of base systems during the current season on all their fields so that the process is completed by the 2008 season. *The new rule applies to first, second and third base***

In his book, “The Awakening Surgeon,” Dr. David Janda discusses a two-year study he conducted comparing injuries sustained on fields using traditional stationary bases versus fields with disengage-able bases. In the study, 637 games were played on the disengage-able–base field and 635 on the stationary-base field. By the end of the study, 45 players sustained injuries on the stationary-base field while only two were injured on the fields with disengage-able bases.

The study concluded that, although the disengage-able bases did not prevent all sliding injuries, they can reduce the number of these injuries.

11.0 Incident/Injury Reporting Process

11.1 Process

11.1.1 At Time of Injury

If an individual is injured, on or off the field, that person should be attended to immediately. No injury is too small to note. At least one coach and/or manager from each team has had first aid training provided to them by Commerce Little League and should have the first aid manual with them for ready reference.

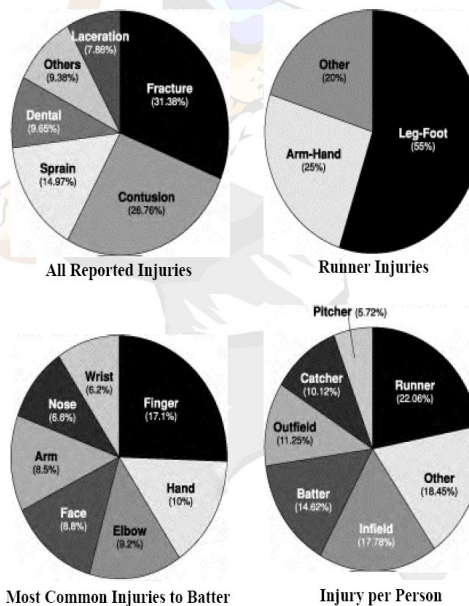
11.1.2 Report

After the individual is treated an injury report should be completed prior to leaving the Maple Glen premises. Once the injury report is completed to the best extent possible, it should be returned to a member of the Commerce Little League Board of Directors (preferably the Safety Director)

11.1.3 Follow Up

Each injury report is to be forwarded to the Safety Officer for follow-up. In the event of a serious injury (i.e. requiring hospitalization or ambulance service), the Safety Officer should be contacted immediately to determine if the completion of a Little League Notification Claim Form is needed. This form, upon completion, is sent to the Little League Headquarters for purposes of insurance coverage.

LITTLE LEAGUE BASEBALL INJURY DATA - 1985-1993



Injury data can provide opportunity to improve your safety program in several ways...

* Identify potential risks
* Target coaching techniques

* Define coaches and managers training needs
* Determine equipment needs for first-aid

**Activities/Reporting****A Safety Awareness Program's
Incident/Injury Tracking Report**

League Name: _____ League ID: ____ - ____ - ____ Incident Date: _____

Field Name/Location: _____ Incident Time: _____

Injured Person's Name: _____ Date of Birth: _____

Address: _____ Age: _____ Sex: ☐ Male ☐ Female

City: _____ State _____ ZIP: _____ Home Phone: () _____

Parent's Name (If Player): _____ Work Phone: () _____

Parents' Address (If Different): _____ City _____

Incident occurred while participating in:A.) ☐ Baseball ☐ Softball ☐ Challenger ☐ TADB.) ☐ Challenger ☐ T-Ball (5-8) ☐ Minor (7-12) ☐ Major (9-12) ☐ Junior (13-14)
☐ Senior (14-16) ☐ Big League (16-18)C.) ☐ Tryout ☐ Practice ☐ Game ☐ Tournament ☐ Special Event
☐ Travel to ☐ Travel from ☐ Other (Describe): _____**Position/Role of person(s) involved in incident:**D.) ☐ Batter ☐ Baserunner ☐ Pitcher ☐ Catcher ☐ First Base ☐ Second
☐ Third ☐ Short Stop ☐ Left Field ☐ Center Field ☐ Right Field ☐ Dugout
☐ Umpire ☐ Coach/Manager ☐ Spectator ☐ Volunteer ☐ Other: _____

Type of injury: _____

Was first aid required? ☐ Yes ☐ No If yes, what: _____Was professional medical treatment required? ☐ Yes ☐ No If yes, what: _____

(If yes, the player must present a non-restrictive medical release prior to to being allowed in a game or practice.)

Type of incident and location:A.) On Primary Playing Field B.) Adjacent to Playing Field D.) Off Ball Field
☐ Base Path: ☐ Running or ☐ Sliding ☐ Seating Area ☐ Travel:
☐ Hit by Ball: ☐ Pitched or ☐ Thrown or ☐ Batted ☐ Parking Area ☐ Car or ☐ Bike or
☐ Collision with: ☐ Player or ☐ Structure C.) Concession Area ☐ Walking
☐ Grounds Defect ☐ Volunteer Worker ☐ League Activity
☐ Other: _____ ☐ Customer/Bystander ☐ Other: _____

Please give a short description of incident: _____

Could this accident have been avoided? How: _____

This form is for Little League purposes only, to report 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 claims or injuries which could become claims, please fill out and turn in the official Little League Baseball Accident Notification Form available from your league president and send to Little League Headquarters in Williamsport (Attention: Dan Kirby, Risk Management Department). Also, provide your District Safety Officer with a copy for District files. All personal injuries should be reported to Williamsport as soon as possible.

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

Signature: _____ Date: _____



11.3 WHAT PARENTS SHOULD KNOW ABOUT LITTLE LEAGUE® INSURANCE

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

The Little League Insurance Program is designed to afford protection to all participants at the most economical cost to the local league. The Little League Player Accident Policy is an excess coverage, accident only plan, to be used as a supplement to other insurance carried under a family policy or insurance provided by parent's employer. If there is no primary coverage, Little League insurance will provide benefits for eligible charges, up to Usual and Customary allowances for your area, after a \$50.00 deductible per claim, up to the maximum stated benefits.

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

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

1. The Little League Baseball and Softball accident notification form must be completed by parents (if the claimant is under 19 years of age) and a league official and forwarded directly to Little League Headquarters within 20 days after the accident. A photocopy of the form should be made and kept by the parent/claimant. Initial medical/dental treatment must be rendered within 30 days of the Little League accident.
2. Itemized bills, including description of service, date of service, procedure and diagnosis codes for medical services/supplies and/or other documentation related to a claim for benefits are to be provided within 90 days after the accident. In no event shall such proof be furnished later than 12 months from the date the initial medical expense was incurred.
3. When other insurance is present, parents or claimant must forward copies of the Explanation of Benefits or Notice/Letter of Denial for each charge directly to Little League 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 after the 52-week time limit when:
 - (a) Deferred medical benefits apply when necessary treatment requiring the removal of a pin /plate, applied to transfix a bone in the year of injury, or scar tissue removal, after the 52-week time limit is required. The Company will pay the Reasonable Expense incurred, subject to the



Policy's maximum limit of \$100,000 for any one injury to any one insured. However, in no event will any benefit be paid under this provision for any expenses incurred more than 24 months from the date the injury was sustained.

(b) If the Insured incurs Injury, to sound, natural teeth and Necessary Treatment requires treatment for that Injury be postponed to a date more than 52 weeks after the injury due to, but not limited to, the physiological changes of a growing child, the Company will pay the lesser of: 1. A maximum of \$1,500 or 2. Reasonable Expenses incurred for the deferred dental treatment.

Reasonable Expenses incurred for deferred dental treatment are only covered if they are incurred on or before the insured's 23rd birthday.

Reasonable Expenses incurred for deferred root canal therapy are only covered if they are incurred within 104 weeks after the date the Injury occurs.

No payment will be made for deferred treatment unless the Physician submits written certification, within 52 weeks after the accident, that the treatment must be postponed for the above stated reasons.

Benefits are payable subject to the Excess Coverage and the Exclusions provisions of the Policy. We hope this brief summary has been helpful in a better understanding of an important aspect of the operation of the Little League endorsed insurance program.

Accident Insurance

All children who play Little League Baseball and Softball, as well as adults who volunteer as managers, coaches, umpires, official scorekeepers, player agents and safety officers must be covered adequately by accident insurance. Action to require all leagues to carry accident insurance was legislated by the Little League Congress in 1957.

Money to pay insurance premiums is raised by chartered leagues in the name of Little League Baseball, and it must be applied to assure the best insurance protection for the lowest cost.

Leagues may purchase their insurance from any source, but coverage must be at least comparable to that provided by the low rate plan through Little League Baseball. Little League Baseball has campaigned vigorously, and will continue to do so, to provide the best possible insurance coverage at lowest costs.

An excess provision with a deductible is included in the Little League blanket accident policy, eliminating payments for medical expenses covered by any other insurance compensation. This in no way affects the broad benefits of protection available to all leagues, but it does prevent unwarranted double payments to parents for accident coverage purchased by the local league. Little League accident insurance also covers eligible participants while traveling directly, without delay, to and from the field as well as during scheduled practice sessions and scheduled games. The benefits include provisions for accident, death or dismemberment and also for medical expenses. Coverage also extends to volunteers involved in authorized activities.

Local Little League organizers are encouraged to institute ASAP (A Safety Awareness Program) in their leagues. This program, supported by Musco Sports Lighting and AIG Insurance, shares the best safety ideas of volunteers, and has been extremely successful. Local leagues can even receive credits and qualify for awards by participating in ASAP.



Leagues that submit a qualified safety program by the announced deadline receive a 20 percent accident insurance credit on the following season's fees. For many leagues, this means savings of more than \$200 annually.

Blanket accident coverage is underwritten by an insurance company, not Little League Baseball, Incorporated. However, insurance forms are returned to headquarters for processing – another money-saving measure of direct benefit to local Little Leagues. Safety Director or CLLB Board of Directors will fill out these forms – forms will be provided by CLLB.

CLLB Safety Plan



Little League® Baseball & Softball
CLAIM FORM INSTRUCTIONS
For claims occurring after January 1, 2005



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

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

The AIG Accident Master Policy acquired through Little League contains an "Excess Coverage Provision" whereby all personal and/or group insurance shall be used first.

To help explain insurance coverage to parents/guardians refer to *What Parents Should Know* on the internet that should be reproduced on your league's letterhead and distributed to parents/guardians of all participants at registration time.

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

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

The AIG Accident Policy is acquired by leagues, not parents, and provides comprehensive coverage at an affordable cost. Accident coverage is underwritten by National Union Fire Insurance Company of Pittsburgh, Pa., with its principal place of business in New York, NY. This is a brief description of the coverage available under the policy. The policy will contain limitations, exclusions, and termination provisions.

With your league's cooperation, insurance rates have increased only three times since 1965. This rate stability would not have been possible without your help in stressing safety programs at the local level. The ASAP manual, **League Safety Officer Program Kit**, is recommended for use by your Safety Officer. In 2000 the State of Virginia was the first state to have its accident insurance rates reduced by high participation in ASAP and reduction in injuries. In 2002, seven more states have had their accident insurance rates reduced, as well. They are Alaska, California, Delaware, Idaho, Montana, Washington, Wisconsin.

TREATMENT OF DENTAL INJURIES

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



CHECKLIST FOR PREPARING CLAIM FORM

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

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

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

PART II - LEAGUE STATEMENT

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

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



Commerce Little League Baseball ASAP



LITTLE LEAGUE BASEBALL® ACCIDENT NOTIFICATION FORM INSTRUCTIONS For claims occurring after January 1, 2005

Send Completed Form To:
Little League Baseball, Incorporated
539 US Route 15 Hwy, PO Box 3485
Williamsport PA 17701-0485
Accident Claim Contact Numbers:
Phone: 570-327-1674 Fax: 570-326-2951

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.

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

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

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

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

Date of Accident	Time of Accident	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 (5-18) | <input type="checkbox"/> PLAYER | <input type="checkbox"/> TRYOUTS | <input type="checkbox"/> SPECIAL EVENT (NOT GAMES) |
| <input type="checkbox"/> SOFTBALL | <input type="checkbox"/> T-BALL (5-8) | <input type="checkbox"/> MANAGER, COACH | <input type="checkbox"/> PRACTICE | <input type="checkbox"/> SPECIAL GAME(S) |
| <input type="checkbox"/> CHALLENGER | <input type="checkbox"/> MINOR (7-12) | <input type="checkbox"/> VOLUNTEER UMPIRE | <input type="checkbox"/> SCHEDULED GAME | (Submit a copy of your approval from Little League Incorporated) |
| <input type="checkbox"/> TAD (2ND SEASON) | <input type="checkbox"/> LITTLE LEAGUE (9-12) | <input type="checkbox"/> PLAYER AGENT | <input type="checkbox"/> TRAVEL TO | |
| | <input type="checkbox"/> JUNIOR (13-14) | <input type="checkbox"/> OFFICIAL SCOREKEEPER | <input type="checkbox"/> TRAVEL FROM | |
| | <input type="checkbox"/> SENIOR (14-16) | <input type="checkbox"/> SAFETY OFFICER | <input type="checkbox"/> TOURNAMENT | |
| | <input type="checkbox"/> BIG LEAGUE (16-18) | <input type="checkbox"/> VOLUNTEER WORKER | <input type="checkbox"/> OTHER (Describe) | |

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., an AIG Company, or its representative, any and all such information. 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



Commerce Little League Baseball ASAP



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? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Provide names and addresses of any known witnesses to the reported accident.		

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

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

Does your league use breakaway bases on: ☐ ALL ☐ SOME ☐ NONE of your fields?

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 _____



Commerce Little League Baseball ASAP



General Liability Claim Form

Send Completed form to:

539 US Route 15 Hwy

P.O. Box 3485

Williamsport, Pennsylvania 17701

(570) 326-1921 Fax (570) 326-2961

Telephone immediate notice to Little League Baseball International

CM

(LEXINGTON USE ONLY)

Insured	Name of League		League I. D. Number (Used as location code)	
	Name of League Official (please print)		Position in League	
	Address of League Official (Street, City, State, Zip)		Phone No. (Res.)	
			Phone No. (Bus.)	
Time and Place of Accident	Date of Accident	Hour <input type="checkbox"/> AM <input type="checkbox"/> PM	Accident occurred at (Street, City, State, Zip)	
	Taking out of Operations conducted at			
	Was Police Report made? If yes, where? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Description of Accident	State cause and describe facts surrounding accident (Use reverse side if needed)			
Who owns Premises		Person in charge of Premises		
Coverage Data	Limits BI / PD:	Med. Pay: None	Elevator: Yes	Products: Yes
	Policy Number:		Policy Dates: Begin	End
	Is there any other insurance applicable to this Risk? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Property Damage	Name of Owner		Description of Property	
	Address (Street, City, State, Zip)		Name of Insurance Co.	
			Nature and Extent of Damages and Estimate of Repairs	
Insured Person and Injuries:	Name		Phone No. (Res.)	
	Address (Street, City, State, Zip)		Occupation	Age <input type="checkbox"/> Married <input type="checkbox"/> Single
			Phone No. (Bus.)	
	Employer Name and Address			
Did you provide or authorize medical attention? <input type="checkbox"/> Yes <input type="checkbox"/> No		Attending Doctor's Name and Address		
Description of Injury				
Where was the injured taken after accident?		Probable length of Disability		
Witnesses:	Name, Address, Phone Number			
	Name, Address, Phone Number			
	Name, Address, Phone Number			
Date of Report	Signature of League Official		Position in League	

USE REVERSE SIDE FOR DIAGRAM AND ANY OTHER INFORMATION OF IMPORTANCE IN REPORTING THE ACCIDENT



G-1055/75-A

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**Little League®
Baseball and Softball
Medical Release**

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

Player: _____ Date of Birth: _____

League Name: _____ I.D. Number: _____

Parent or Guardian Authorization:

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

Family Physician: _____ Phone: _____

Address: _____

Hospital Preference: _____

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
-------------------	------------	--------	---------------------

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.

Medical Diagnosis	Medication	Dosage	Frequency of Dosage
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Date of last Tetanus Toxoid Booster: _____

Mr./Mrs./Ms. _____

Authorized Parent/Guardian Signature

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

Little League does not limit participation in its activities on the basis of disability, race, color, creed, national origin, gender, sexual preference or religious preference.

my documents/league supplies/2005/medical release form

rev. 2/05.1



12.0 CLLB First Aid Training Overview

12.1 Mandatory Training

Mandatory first aid including concussion training and AED defibrillator basics provided by the Commerce Fire Dept. and fundamental baseball safety training for 2018 will be held on [February 28, 2019 @ 7PM at the Richardson Center in Commerce Township, Michigan.](#) All managers, head coaches, and board members are required to attend this training and sign-in as proof of attendance. A minimum of one participant per team is required to receive the training before the start of the season. As a result, assistant coaches may attend or represent their team at the training session. Furthermore, any coach that attends and receives the training is encouraged to pass along the safety fundamentals onto their players and fellow coaches. Safety is a “Team Effort” and it all starts with preventative training. Umpires will also be involved in the safety training. All coaches will receive a binder with the necessary medical and volunteer forms and the completed Safety Plan is included to be available for all volunteers to view and familiarize themselves with.

The training will consist of:

- A review of common baseball incidents and how they should be handled. Medical personnel trained in sports medicine will provide fundamental training to our organization.
- A Safety Manual containing first aid and preventative measures will be distributed to all managers, to include such items as stretching and warming- up players, pitcher throw count safety, insect bites, asthma, how to handle heat, bicycle safety, equipment inspection, field inspection, etc. Safety material will also be distributed or available via the CLLB website.
- The safety officer is available to answer any questions at any time. Each attendee of the first aid training is given ample opportunity to ask any questions.
- If any team was ***not*** represented at the mandatory safety training, the Safety Officer will contact the appropriate Division V.P. and he/she must conduct a safety and first aid session with the un-trained team representative. To encourage active compliance, a team’s equipment will not be disbursed and no coach or manager will be allowed to interact or coach their team until they receive the necessary safety training.



12.2 Health and Medical Basics

What is first aid? And administering emergency first aid:

First aid - Is the first care given to an accident victim. It is usually performed by the first person on the scene and continued until professional medical help arrives (911 - EMT.) At no time should anyone go beyond his or her own capabilities when administering first aid. *Know your limits and the potential risk to the accident victim!*

The average response time for an EMT call is relatively short. Therefore, do not attempt to move or transport a seriously injured victim to a hospital. Perform whatever First Aid you can and wait for the EMT's and ambulance to arrive.

Get Permission to treat an injured victim:

You must have the permission to treat an injured victim before giving first-aid. Tell the victim who you are, how much training you have, and how you plan to help. Only then can a conscious victim (adult) give you permission to give care. Do not give care to a conscious victim who refuses your offer to give care. If the conscious victim is an infant or child, permission to give care should be obtained from a supervising adult when one is available. If the condition is serious, permission is implied if a supervising adult is not present.

First aid kits:

Basic first aid training and first aid kits will be furnished to each team at the beginning of the season. The first aid kit will become part of the team's equipment package and shall be taken to all practices, batting cage practices, games (whether season or post-season) and any other CLLB Little League event.

To replenish materials in the Team First Aid Kit, the Manager may contact the CLLB Safety Officer or a member on the board. (See contact information on **page # 5** of the Safety Manual.)

9-1-1 Emergency Number:

The most important help that 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 to give the dispatcher the necessary information and answer any questions that he or she might ask. Provide the name of our baseball fields (Maple Glen Park) and the name of the nearby intersection (Glengary Rd. and Benstein Rd.)

In addition, provide the telephone number and the name from which the call is being made. Appoint somebody to go to the street and look for the **ambulance** and/or **fire engine** and flag them down if necessary. This saves valuable time.



12.3 First Aid Kits - Mean Supplied Safety

Each first aid kit will be stocked and distributed at the beginning of the season.

Refillable first aid supplies will be available in the field shed. It is highly recommended that each team have a couple of extra bottles of water on hand during the hot times of the year.

Below is an example of supplies that may be included in the first aid kit:

- 2 - 4" x 6" instant cold compresses
- 1 - 2" x 4.5 yd conforming gauze roll bandage
- 4 - Large Butterfly wound closures
- 1 - Sterile eye pad
- 1 - 3" x 5 yd - Elastic bandage wrap
- 10 - ¾" x 3" Curad elbow and knee plastic bandages
- 3 - 2" x 4" Curad fabric bandages
- 2 - Curad knuckle fabric bandages
- 2 - Curad large fingertip fabric bandages
- 1 - 5" x 9" Trauma pad
- 4 - 2" x 2" Gauze dressing pad
- 4 - 4" x 4" gauze dressing pad
- 1 - ½" x 5 yd - First Aid tape
- 1 - 3" x 4" Curad telfa non- stick pad with adhesive edges
- 1 - 1 ½" x 10 yd porous cloth adhesive tape
- 1 - 2" x 2" Premium grade moleskin
- 4 - Antibiotic ointment packs
- 9 - Antiseptic cleansing wipes (sting free)
- 2 - Exam quality gloves
- 1 - Carry anywhere plastic cases
- 1 - Scissors and 1 - Tweezers
- 2 - 6" Cotton tipped applicators
- 2 - 6" x ¾" Finger splints



12.4 CLLB – First Aid Guide

Medical emergencies don't occur every day. But when they do, information can help you deal with these situations. The following information will hopefully help to assess an injury situation; however, it should not be viewed as a substitute for professional medical advice, emergency treatment or formal first aid training. If you're in a life-threatening or emergency medical situation, seek medical assistance immediately.

1.) Cuts & Scrapes:

Minor cuts and scrapes usually don't require a trip to the emergency room. Yet proper care is essential to avoid infection or other complications. These guidelines can help you care for simple wounds:

Stop the bleeding - Minor cuts and scrapes usually stop bleeding on their own. If they don't, apply gentle pressure with a clean cloth or bandage. Hold the pressure continuously for 20 to 30 minutes. Don't keep checking to see if the bleeding has stopped because this may damage or dislodge the fresh clot that's forming and cause bleeding to resume. If the blood spurts or continues to flow after continuous pressure, seek medical assistance.

Clean the wound - Rinse out the wound with clear water. Soap can irritate the wound, so try to keep it out of the actual wound. If dirt or debris remains in the wound after washing, use tweezers cleaned with alcohol to remove the particles. If debris remains embedded in the wound after cleaning, see your doctor. Thorough wound cleaning reduces the risk of tetanus. To clean the area around the wound, use soap and a washcloth. There's no need to use hydrogen peroxide, iodine or an iodine-containing cleanser. These substances irritate living cells. If you choose to use them, don't apply them directly on the wound.

Apply an antibiotic - After you clean the wound, apply a thin layer of an antibiotic cream or ointment such as Neosporin or Polysporin to help keep the surface moist. The products don't make the wound heal faster, but they can discourage infection and allow your body's healing process to close the wound more efficiently. Certain ingredients in some ointments can cause a mild rash in some people. If a rash appears, stop using the ointment.

Cover the wound - Bandages can help keep the wound clean and keep harmful bacteria out. After the wound has healed enough to make infection unlikely, exposure to the air will speed wound healing.

Get stitches for deep wounds - A wound that cuts deeply through the skin or is gaping or jagged-edged and has fat or muscle protruding usually requires stitches. A strip or two of surgical tape may hold a minor cut together, but if you can't easily close the mouth of the wound, see your doctor as soon as possible. Proper closure within a few hours minimizes the risk of infection.

Get a tetanus shot - Doctors recommend you get a tetanus shot every 10 years. If your wound is deep or dirty and your last shot was more than five years ago, your doctor may recommend a tetanus shot booster. Get the booster within 48 hours of the injury



2.) Bruise:

A bruise forms when a blow breaks small blood vessels near your skin's surface, allowing a small amount of blood to leak out into the tissues under your skin. The trapped blood appears as a black-and-blue mark. Sometimes, there also are tiny red dots or red blotches.

If your skin isn't broken, you don't need a bandage.

You can, however, enhance healing with these simple techniques:

Elevate the injured area.

Apply ice or a cold pack for 30 to 60 minutes at a time for a day or two after the injury.

Consider Children's Tylenol for pain relief (junior strength acetaminophen.)

See your doctor if:

You have unusually large or painful bruises — particularly if your bruises seem to develop for no known reasons.

You bruise easily and you're experiencing abnormal bleeding elsewhere, such as from your nose or gums, or you notice blood in your eyes, your stool or your urine. You have no history of bruising, but suddenly experience bruises.

These signs and symptoms may indicate a more serious problem, such as a blood-clotting problem or blood-related disease. Bruises accompanied by persistent pain or headache also may indicate a more serious underlying illness and require medical attention.

3.) Corneal Abrasion (scratch):

The most common types of eye injury involve the cornea — the clear, protective "window" at the front of the eye. Contact with dust, dirt, sand, wood shavings, metal particles or even an edge of a piece of paper can scratch or cut the cornea. Usually the scratch is superficial, and this is called a corneal abrasion. Some corneal abrasions become infected and result in a corneal ulcer, which is a serious problem.

Everyday activities can lead to corneal abrasions. Examples are playing sports, doing home repairs or being scratched by children who accidentally brush your cornea with a fingernail. Other common injuries to the cornea include splash accidents — contact with chemicals ranging from antifreeze to household cleaners.

Because the cornea is extremely sensitive, abrasions can be painful. If your cornea is scratched, you might feel like you have sand in your eye. Tears, blurred vision, increased sensitivity or redness around the eye can suggest a corneal abrasion. In case of injury, seek prompt medical attention.

Other immediate steps you can take for a corneal abrasion are to:

Use clean water or saline solution to rinse the eye. Use an eyecup or small, clean glass positioned with its rim resting on the bone at the base of your eye socket. If your work site has an eye-rinse station, use it to run lukewarm tap water over the eye or splash the eye. Rinsing the eye may wash out an offending foreign body.

Blink several times. This movement may remove small particles of dust or sand.



Pull the upper eyelid over the lower eyelid. The lashes of the lower eyelid can brush a foreign body from the undersurface of the upper eyelid.

Take caution to avoid certain actions that may aggravate the injury:

Don't try to remove an object that's imbedded in the eyeball. Also avoid trying to remove a large object that makes closing the eye difficult. **Don't rub your eye after an injury.** Touching or pressing on the eye can worsen a corneal abrasion.

4.) Fracture (broken bones):

A fracture is a broken bone. It requires medical attention. If the broken bone is the result of a major trauma or injury, call 911 or your local emergency number. Also call for emergency help if:

- The person is unresponsive, isn't breathing or isn't moving. Begin cardiopulmonary resuscitation (CPR) if there's no respiration or heartbeat.
- There is heavy bleeding.
- Even gentle pressure or movement causes pain.
- The limb or joint appears deformed.
- The bone has pierced the skin.
- The extremity of the injured arm or leg, such as a toe or finger, is numb or bluish at the tip.
- You suspect a bone is broken in the neck, head or back.
- You suspect a bone is broken in the hip, pelvis or upper leg (for example, the leg and foot turn outward abnormally, compared with the uninjured leg).

Take these actions immediately while waiting for medical help:

Stop any bleeding - Apply pressure to the wound with a sterile bandage, a clean cloth or a clean piece of clothing.

Immobilize the injured area - Don't try to realign the bone, but if you've been trained in how to splint and professional help isn't readily available, apply a splint to the area.

Apply ice packs to limit swelling and help relieve pain until emergency personnel arrive - Don't apply ice directly to the skin — wrap the ice in a towel, piece of cloth or some other material.

Treat for shock - If the person feels faint or is breathing in short, rapid breaths, lay the person down with the head slightly lower than the trunk and, if possible, elevate the legs.

5.) Head Trauma:

Most head trauma involves injuries that are minor and don't require hospitalization. However, dial 911 or call for emergency medical assistance if any of the following signs are apparent:

- Severe head or facial bleeding
- Change in level of consciousness for more than a few seconds
- Black-and-blue discoloration below the eyes or behind the ears
- Cessation of breathing



- Confusion
- Loss of balance
- Weakness or an inability to use an arm or leg
- Unequal pupil size
- Repeated vomiting
- Slurred speech

If severe head trauma occurs:

Keep the person still - Until medical help arrives, keep the person who sustained the injury lying down and quiet in a darkened room, with the head and shoulders slightly elevated. Don't move the person unless necessary and avoid moving the person's neck.

Stop any bleeding - Apply firm pressure to the wound with sterile gauze or a clean cloth. But don't apply direct pressure to the wound if you suspect a skull fracture.

Watch for changes in breathing and alertness - If the person shows no signs of circulation (breathing, coughing or movement), begin CPR.

6.) Heatstroke:

Heatstroke is similar to heat cramps and heat exhaustion. It's one of the heat-related problems that often result from heavy work in hot environments, usually accompanied by inadequate fluid intake. Older adults, people who are obese and people born with an impaired ability to sweat are at high risk of heatstroke. Other risk factors include dehydration, alcohol use, cardiovascular disease and certain medications.

What makes heatstroke much more severe and potentially life-threatening is that the body's normal mechanisms for dealing with heat stress, such as sweating and temperature control, are lost. The main sign of heatstroke is a markedly elevated body temperature — generally greater than 104 F — with changes in mental status ranging from personality changes to confusion and coma. Skin may be hot and dry, although in heatstroke caused by exertion, the skin is usually moist.

Other signs and symptoms may include:

- Rapid heartbeat
- Rapid and shallow breathing
- Elevated or lowered blood pressure
- Cessation of sweating
- Irritability, confusion or unconsciousness
- Fainting, which may be the first sign in older adults

If you suspect heatstroke:

Move the person out of the sun and into a shady or air-conditioned space. Dial 911 or call for emergency medical assistance.

Cool the person by covering him or her with damp sheets or by spraying with cool water. Direct air onto the person with a fan or newspaper.



7.) Spinal Injury:

If you suspect a back or neck (spinal) injury, **do not move the affected person.** Permanent paralysis and other serious complications can result. Assume a person has a spinal injury if:

- There's evidence of a head injury with an ongoing change in the person's level of consciousness.
- The person complains of severe pain in his or her neck or back.
- The person won't move his or her neck.
- An injury has exerted substantial force on the back or head.
- The person complains of weakness, numbness or paralysis or lacks control of his or her limbs, bladder or bowel.
- The neck or back is twisted or positioned oddly.

If you suspect someone has a spinal injury:

Dial 911 or call for emergency medical assistance. The goal of first aid for a spinal injury is to keep the person in much the same position as he or she was found. Keep the person still. Place heavy towels on both sides of the neck or hold the head and neck to prevent movement.

Provide as much first aid as possible without moving the person's head or neck. If the person shows no signs of circulation (breathing, coughing or movement), begin CPR, but do not tilt the head back to open the airway. Use your fingers to gently grasp the jaw and lift it forward.

If you absolutely must roll the person because he or she is vomiting, choking on blood or in danger of further injury, use at least two people. Work together to keep the person's head, neck and back aligned while rolling the person onto one side.

8.) Sunburn:

Signs and symptoms of sunburn usually appear within a few hours of exposure, bringing pain, redness, swelling and occasional blistering. Because exposure often affects a large area of your skin, sunburn can cause headache, fever and fatigue.

If you have a sunburn:

- Take a cool bath or shower.
- Apply an aloe vera lotion several times a day.
- Leave blisters intact to speed healing and avoid infection.

If needed, take an over-the-counter pain reliever such as children's Tylenol (non-acetaminophen.)

9.) Tooth Loss:

If your tooth is knocked out, get emergency dental care. It's sometimes possible to remedy tooth loss by successfully re-implanting permanent teeth that have been knocked out. But this is an option only if you act quickly.

If your tooth is knocked out:

- Handle your tooth by the top only, not the roots.
- Don't rub it or scrape it to remove dirt.



- Gently rinse your tooth in a bowl of tap water. Don't hold it under running water.
- Try to replace your tooth in the socket. Then bite down gently on gauze or a moistened tea bag to help keep it in place.
- If you can't replace your tooth in the socket, immediately place it in whole milk, your own saliva or a warm, mild saltwater solution (1/4 teaspoon salt to 1 quart water).

Get medical attention from a dentist or emergency room immediately.

If you participate in contact sports, you can often prevent tooth loss by wearing a mouth guard.

10.) Pre- Season Conditioning

Conditioning should begin approximately six to eight weeks before practice begins.

A good conditioning program should include the following:

- Flexibility training
- Agility exercises
- Balance and coordination
- Endurance Training
- Strength training
- Power training

11.) Asthma

Become familiar with any child that may have asthma on your team (i.e., review the medical release forms, ask the team, parents, etc.) Ensure that the child who has asthma on the team, brings his/her inhaler to practice & games.

Be familiar with the following asthma warning signs.



Asthma Emergency Signs

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

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

Asthma is different for every person.

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

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



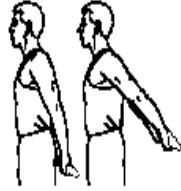




Call 9-1-1 and the child's parent/guardian!

Michigan Asthma Steering Committee of the Michigan Department of Community Health

12.5 Basic Stretching

Routine For: CLLB
Created By: Jeff Weir ATC, CSCS

Mar 19, 2008
Pre Baseball Warmup

<p>Active Warm up...</p> <p>Jogging to break a sweat</p> <p>Shoulder circles...start small and get bigger approx 15 sec Repeat with circles in opposite direction</p> <p>Active Trunk rotation...hands on hips and rotate at hips as if swinging a bat repeat 15 seconds</p> <p>STRETCHING SHOULD NOT HURT!</p>	<p>SHOULDER - 72 ROM: Posterior Capsule Stretch</p>  <p>Gently pull on <u>right</u> forward elbow with other hand until stretch is felt in shoulder. Hold <u>15</u> seconds.</p> <p>Repeat <u>1</u> times per set. Do <u>1</u> sets per session. Do <u>2-3</u> sessions per day.</p>	<p>SHOULDER - 71 ROM: Inferior Capsule Stretch</p>  <p>Gently pull on <u>right</u> raised elbow with other hand until stretch is felt in shoulder. Hold <u>15</u> seconds.</p> <p>Repeat <u>1</u> times per set. Do <u>1</u> sets per session. Do <u>2-3</u> sessions per day.</p>
<p>SHOULDER - 94 ROM: Extension</p>  <p>Stand with locked hands behind back. Raise arms as far as possible.</p> <p>Repeat <u>15</u> times per set. Do <u>1</u> sets per session. Do <u>2-3</u> sessions per day.</p>	<p>HAND - 14 Wrist Extensor Stretch</p>  <p>Keeping elbow straight, grasp right hand and slowly bend wrist forward until stretch is felt make a fist to increase stretch. Hold 15 seconds. Relax.</p> <p>Repeat <u>1</u> times per set. Do <u>1</u> sets per session. Do <u>2-3</u> sessions per day.</p>	<p>HAND - 13 Wrist Flexor Stretch</p>  <p>Keeping elbow straight, grasp right hand and slowly bend wrist back until stretch is felt. Hold <u>15</u> seconds. Relax.</p> <p>Repeat <u>1</u> times per set. Do <u>1</u> sets per session. Do <u>2-3</u> sessions per day.</p>
<p>HIP / KNEE - 67 Stretching: Hamstring</p>  <p>Cross <u>right</u> leg behind other leg. Bend at waist, reaching toward floor. Hold <u>15</u> seconds. Relax.</p> <p>Repeat with opposite leg behind. Do 1 sets per session. Do 2-3 sessions per day.</p>	<p>HIP / KNEE - 37 Stretching: Quadriceps (Standing)</p>  <p>Pull <u>right</u> heel toward buttock until stretch is felt in front of thigh. Hold <u>15</u> seconds.</p> <p>Repeat <u>1</u> times per set. Do <u>1</u> sets per session. Do <u>2-3</u> sessions per day.</p>	

12.6 Pre-Game Safety Check

Before the start of each game the managers should be sure the field is checked for holes, damaged bases, stones, and other foreign objects. Also of note is if the home team has raked the infield prior to the start of the game. Managers are required to continually review the state of their equipment (helmets, Catcher's equipment, first aid kit, etc.) to see if anything needs repair or replacement. In the event the equipment is faulty it is the responsibility of the manager to not use the faulty equipment but to bring it to the attention of the equipment manager for repair or replacement. In the event the first aid kit requires replenishment, the manager can acquire supplies from the field shed or contact the safety officer for needed items.

While game play should not start until the field is safe, items that need further attention can be noted on the game report. Once the game is ended, the umpire (s) list their name (s) in the proper place, fill in the outcome of the game, list the date and have managers sign the report. Umpires will take a copy and each manager receives a copy. Winning team must email an electronic copy of the game report to the division VP and any safety concerns should be forwarded to the field director, equipment director, or the safety director.

By establishing the checklist and using it throughout the season we accomplish the following goals:

Regularly review field conditions so repairs can be made,
Regularly review condition of equipment and stock of first aid kits,
Verify the activity of the umpires,
Verify game scores and allow for quicker turnaround of information to the www.commercelittleleague.com website.





12.7 Concession Stand Safety:

At this time the CLLB concession stand operates in accordance with the guidelines set forth by the local health department to insure public safety.

The following concession stand safety tips should be observed:

- No person under the age of 13 will be allowed behind the counter of the concession stand.
- People working in the concession stand will be trained in the proper handling of menu items; as well as, any relevant sanitary requirements. Antibacterial hand sanitizer lotion will be available for use for anyone working in the concession stand. Training for sanitary use and operation within the concession stand will be conducted by the Concession Stand Director.
- A fully stocked First Aid kit will be placed in the concession stand.

This ASAP Safety plan will be reviewed and updated yearly. The safety plan will be sent to the DA or DSO for review prior to submission to Little League



Concession Stand Tips

SAFETY FIRST

Requirement 9

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

1. Menu.

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

2. Cooking.

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

3. Reheating.

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

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

4. Cooling and Cold Storage.

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

5. Hand Washing.

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

6. Health and Hygiene.

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

7. Food Handling.

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

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

8. Dishwashing.

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

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

9. Ice.

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

10. Wiping Cloths.

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

11. Insect Control and Waste.

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

12. Food Storage and Cleanliness.

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

13. Set a Minimum Worker Age.

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

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

4 January-February 2004



Commerce Little League's Manager's Agreement For Use Of Equipment

I, _____, understand that I am being loaned baseball equipment that belongs to the Commerce Little League for the baseball season of _____ and that after the completion of the _____ baseball season I will promptly return all equipment back to Commerce Little League. I also understand that I am responsible for lost or damaged equipment under my care due to neglect. I also understand that if equipment becomes damaged from normal use I must contact the Equipment Director to have the items fixed or replaced at no cost to me. I also understand that I am leaving a deposit of _____ for the baseball equipment and this shall be returned to me when I return all my equipment back to Commerce Little League. I also understand that this deposit may be used towards the purchase of my lost or damaged equipment, and it does not cover the replacement cost of the entire equipment loaned to me.

Manager Signature

Date

Division

Check #

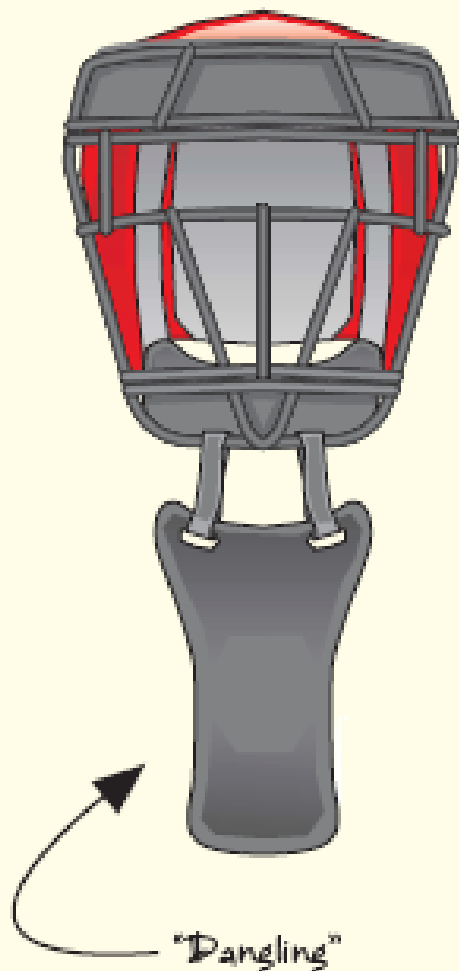
Equipment Director

(Person accepting returned equipment)

Date check returned

First Aid Kit # _____





Make Sure They Are Safe!

REMEMBER:

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

RULE 1.17

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



13.0 Facility Survey

CLLB Safety Plan