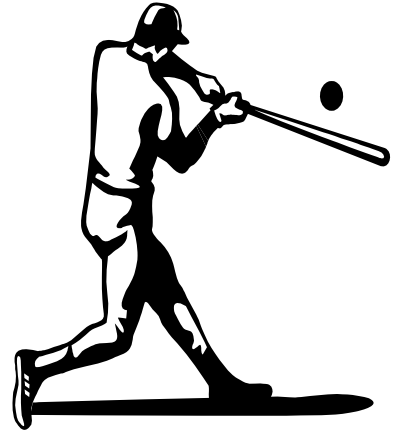


PLAY IT SAFE



UNIVERSITY CITY LITTLE LEAGUE BASEBALL SAFETY MANUAL 2011

Safety Officer: Linda Villalobos

The 2011 Season is Here !!!!!!!

Safety Officer: Linda Villalobos

Question:

Where can I get extra safety supplies (in particular ice bags)?

Answer:

Each field shed and the Snack Bar will have a plastic container clearly marked SAFETY ITEMS. You should find extra safety supplies in these containers, please just take what you need, and report to the Safety Officer when the containers need to be restocked.

Question:

How do I report an injury?

Answer:

#1 - Copies of the Injury Tracking Report Form are in the 1st Aid Kits given to each of the managers. This form is also available in the containers mentioned above.

#2 – Notify the Safety Officer by telephone or e-mail within 24 hours of the injury.



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INTRODUCTION TO THE UNIVERSITY CITY LITTLE LEAGUE SAFETY MANUAL

The 2011 University City Little League Baseball season marks the 14th year of our safety program that was inspired and guided by the ASAP sample program provided by Little League, Williamsport, Pennsylvania. Our chief objectives are to strive to develop not only baseball skills, but also build self and community pride and a healthy self-esteem for all participants. In the process, we hope to also develop responsible young citizens in our communities. We will strive to make Little League Baseball a safe and enjoyable experience for all participants at every level.

The purpose of our safety plan is to establish safety guidelines, which will serve to reduce accidents and injuries as well as provide an inspection and reporting mechanism to assess playing fields and equipment for safe operation and maintenance.

Additionally, our safety guidelines will educate managers, coaches, assistants and players in the value of proper first aid training, injury management, and safety reporting. Parents will also be actively involved in the league safety training and prevention. Instruction in proper conditioning and warm-up calisthenics will help in the prevention of sports injuries. It is our goal that these activities will begin to develop life-long habits in good health and a safe approach to athletic exercise.

With proper training and safety awareness, the league hopes to prevent injuries from occurring. With all of us working together, we will strive to keep our children safe and injury-free. Thanks in advance for your commitment and heightened awareness to safety issues at all times.

**Linda Villalobos
UCLL Safety Officer**

Emergency Numbers

For Police, Fire-Rescue, or Emergency Medical Response – **CALL 911**

Non-Emergency Phone Numbers:

Fire-Rescue - (619) 533-4300

Police - (858) 484-3154

Local Hospitals

Rady Children's 858-576-1700 3020 Childrens Way

Directions: Fwy 805 South to Fwy 163 South, Exit Genesee East (turn left onto Genesee), Genesee turns into Starling, left on Meadow Lark Drive, Meadow Lark Drive turns right and becomes Birmingham, then turn left on Childrens Way.

Scripps Memorial 858-626-6150 9888 Genesee Ave.

Directions: Travel Genesee Ave. North, continue about ½ mile past La Jolla Village Dr, hospital is located on the left side of Genesee.

Kaiser 619-528-5700 4647 Zion Ave

Directions: Take Fwy 805 South to 52 East to 15 South, exit Friars Rd East until Mission Gorge (slight left), and then right on Zion Ave.

Sharp Memorial 858-939-3400 7901 Frost St

Directions: Take 805 South to 163 South, Exit Genesee East (turn left onto Genesee). Turn Left at Health Center Drive, and then turn right at Frost Street.

UCLL Contacts

UCLL President – Jemma Samala (858) 774-3266

UCLL Safety Officer – Linda Villalobos (714) 318-7050

Standley Park Recreation Center

General Phone Number: (858) 552-1652



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

© 1996 Little League Baseball® and Musco Lighting, Inc.

Drinking Guidelines For Hot Day Activities

Before: Drink 8 oz. immediately before exercise

During: Drink at least 4 oz. every 20 minutes

After: Drink 16 oz. for every pound of weight lost

Dehydration signs: Fatigue, flushed skin, light-headed

What to do: Stop exercising, get out of sun, drink

Severe signs: Muscle spasms, clumsiness, delirium



HAVE YOU:

- Walked field for debris/foreign objects**
- Inspected helmets, bats, catchers' gear**
- Made sure a First Aid kit is available**
- Checked conditions of fences, backstops, bases and warning track**
- Made sure a working telephone is available**
- Held a warm-up drill**

CODE OF SAFETY

Our Goals: Education, Awareness, and Prevention

- The responsibility for safety procedures is that of the UCLL Board and ultimately that of the League Safety Officer. Each manager and coach are Safety Representatives for their team and are responsible for ensuring the safety of their players.
- To ensure safety, all managers and coaches must follow all Little League rules as outlined in the official rulebook and in the supplemental ground rules provided by University City Little League. .

Managers and Coaches

- Managers will be trained in emergency first aid, CPR, and Automatic Electronic Defibrillator training.
- Each manager will be given a first-aid kit and manual for his or her team's use. These items are required to be present at all practices and games.
- No games or practices will be held when weather or field conditions are unsafe, particularly when lighting is inadequate.
- Before each game or practice, the playing area will be inspected by the manager or coach for any unsafe conditions such as holes, damage, stones, glass or other foreign objects that could cause injury.
- Report any unsafe conditions to the league Safety Officer or League President.
- Managers and coaches will be responsible for supervising players at all times. At no time should "horse play" be allowed.
- Only players, managers, coaches, and umpires are permitted on the playing field or dugouts during games and practice sessions.
- Establish a procedure for retrieving foul balls batted out of playing area.
- Coaches and managers are to know the locations of nearest phones! If possible, make sure that someone at the field has a cellular phone during all games and practices.

Players

Players will be educated and involved in the safety processes:

- Proper warm-up calisthenics should be performed prior to the start of each practice or game.
- All players should be alert and watching the batter on each pitch during practice and games.
- Someone should be designated to keep bats and loose equipment off the playing field.
- Since 1996, there are no on-deck batting circles or cages allowed. Players will take their practice swings only at the plate. Players are not allowed to hold a bat in their hands until the umpire calls them to bat.
- Batters must wear appropriate protective helmets during batting practices and games while batting, running bases or base coaching.
- Under no circumstances should a player be allowed to throw bats or helmets.
- During warm-up drills, players should be spaced apart so that no one is endangered by wild throws or missed catches.
- Headfirst slides are not allowed except when a runner is returning to base.
- During sliding practice, bases should not be strapped down.

Equipment

Attention should be paid to players wearing proper equipment and uniforms in good repair.

- Equipment should be inspected before each game to insure that helmets are not cracked, bats are not dented, and all catchers gear is in good working condition. Any damaged equipment should not be use and replaced immediately
- Inspect equipment regularly and make sure it fits properly.
- Catchers must wear helmet, masks with throat protector, long model chest protector, shin guards, and protective cup supporters while catching.
- In between innings and in the bullpen, when a catcher is warming up the pitcher, he must wear the catcher's helmet and mask with a throat protector.
- Players should not wear watches, rings, pins, or other metallic or sharp objects.
- Parents of players who wear glasses should be encouraged to provide safety glasses.
- No metal pitching toe can be worn, and no metal cleats are allowed. Baseball shoes with rubber cleats molded to the sole or tennis or gym shoes are authorized.

Think safety

UCLL MINIMUM SAFETY PLAN REQUIREMENTS

Organization

- An active safety officer on the board
- Published league safety manual
- Post and distribute emergency phone numbers
- Team coaches, managers, and parents will act as safety representatives
- Budget allocations for safety improvements
- League mission statement on safety

Training

- Provide training in fundamentals (e.g. sliding, batting, hitting)
- First Aid training for coaches and managers
- Emphasize to coaches and managers the importance of stopping play due to weather or darkness and teaching players sport fundamentals (e.g. proper warm-up, practice and play)

Facilities & Equipment

- Field inspections before games and practices
- Complete the annual Little League Facility Survey
- Posted safety procedures at concession stand.
- Regular inspection and replacement of unsafe equipment.

Activities

- Provide each team with well-equipped First Aid Kit.
- Active enforcement of catcher's gear and helmet rule during practice and warm-ups.
- Safety messages routinely emphasized/posted through out the season via bulletin boards, newsletters, electronic communication and coaches meetings.
- Coaches and managers insistence and encouragement of players' safety awareness and cooperation.
- Prompt and complete accident/injury reporting, if required.

UCLL will use the nationwide check of sex offender registries on all volunteers using the Department of Justice Free Website at <http://www.nsopr.gov>

UCLL EMERGENCY SAFETY PROCEDURES

COACHES MUST HAVE THE ORIGINAL MEDICAL RELEASE FORMS WITH THE TEAM AT ALL TIMES

IN CASE OF EMERGENCY:

1. Give first aid and have someone call 911 if an ambulance is necessary...such as: Head or neck injury, breathing problems, severe trauma—if in doubt call!!!
2. Notify parent(s) immediately if they are not on site.
3. Notify league safety officer by phone within 24 hours, Linda Villalobos 858-926-9646 or by email mvillahome@aol.com .
4. Fill out an ***Incident/Accident Injury Tracking Report*** (example is found at page 13) Copies of this form are in the 1st Aid Kit provided to each manager. If you do not have this form, copies can be found in a binder located in the fields sheds, safety container or contact Safety Officer.
5. After completion of the form deliver or email to the safety officer.
6. Briefly interview any witnesses (including parents, team officials, or players) that may have observed all or part of the accident/injury/incident.
7. Talk to anyone in the UC Little League organization you feel will be helpful (safety officer, board member, coaches).
8. University City Little League insurance **is supplemental** to your own insurance. Claims must be discussed with the league safety officer who will provide our insurance carriers form for submission of a claim to Little League Headquarters.

REMEMBER: SAFETY IS EVERYONE'S JOB. PREVENTION IS THE KEY TO
REDUCING ACCIDENTS AND INJURIES. REPORT ALL HAZARDOUS CONDITIONS
TO THE UCLL BOARD IMMEDIATELY. DON'T PLAY ON A FIELD THAT IS NOT SAFE
OR WITH UNSAFE EQUIPMENT. BE SURE YOUR PLAYERS ARE FULLY EQUIPPED
AT ALL TIMES, ESPECIALLY CATCHERS AND BATTERS. CHECK THE EQUIPMENT OFTEN.

MAKING USE OF ACCIDENT REPORTING

(extracted from Play it Safe, 1999)

In the effort to prevent accidents to Little Leaguers one must deal with the unpredictable actions of many small athletes. One of the most widely accepted ways to counteract the unsafe acts, which are so often a part of such uncertain behavior, is to inquire into the reasons behind such acts and take suitable counter measures.

Since we cannot eliminate all of these disturbing and sometimes tragic mishaps, one must use them as tools to help control similar or related accidents. Also, alert operation makes it possible to get at the causes of the "near misses" so that something can be done to prevent the occurrence of injury-producing accidents.

Which Accidents to Analyze

Good judgment must be used in deciding which accidents to analyze. The severity of an injury should not be the only basis when determining the reasons for an accident and what can be done to reduce the chances of its reoccurrence. The possibility of a similar and more severe accident occurring should be our main reason for getting at the causes and taking suitable corrective action.

Examples of cases that probably would not require detailed checking would be a "strawberry" from sliding or minor strains and bruises not associated with serious unsafe acts or conditions.

Examples of Accidents Requiring Thorough Study Are:

1. A collision that occurred when two players go after the same fly ball, even though no one is hurt, has the possibility of resulting in a serious injury. Questioning players may reveal they had forgotten ball priority assignments in the excitement of trying to make the catch. The corrective measure might be to hold additional ball priority drills. A completed accident cause report is passed on to the Safety Officer and will serve as a warning to managers of other teams.
2. If a player should trip and fall over a bat left on the ground and suffer a small abrasion, the cause and correction of this type of accident may be obvious. A report, however, would serve as a reminder, not only to this team, but to others in the league that equipment left on the field can cause falls, some of which can result in fractures.

Other Uses for Accident Reports

1. The need for corrective measures, of course, is most evident when an injury is severe enough to require professional services. In addition to the need for immediate preventative action, it is very important to have accurate information to complete the insurance claim report.
2. As in any organized endeavor, communications among teams in a league and leagues in a district is important. The safety program can be effective for everyone if each adult, with some safety responsibility, is given a brief report on serious or unusual hazards and the corrective action that has been taken to counteract them.

Further Follow-Up on Accident

Even after corrective measures have been put into effect, responsible adults should continue to check back to make sure that unsafe habits have not been resumed and conditions are not allowed to slip. We advise youngsters to keep their eye on the ball. Let's do the same with safety precautions!

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 TAD
 B.) 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 |
| <input type="checkbox"/> Base Path: <input type="checkbox"/> Running or <input type="checkbox"/> Sliding | <input type="checkbox"/> Seating Area | <input type="checkbox"/> Travel: |
| <input type="checkbox"/> Hit by Ball: <input type="checkbox"/> Pitched or <input type="checkbox"/> Thrown or <input type="checkbox"/> Batted | <input type="checkbox"/> Parking Area | <input type="checkbox"/> Car or <input type="checkbox"/> Bike or |
| <input type="checkbox"/> Collision with: <input type="checkbox"/> Player or <input type="checkbox"/> Structure | C.) Concession Area | <input type="checkbox"/> Walking |
| <input type="checkbox"/> Grounds Defect | <input type="checkbox"/> Volunteer Worker | <input type="checkbox"/> League Activity |
| <input type="checkbox"/> Other: _____ | <input type="checkbox"/> Customer/Bystander | <input type="checkbox"/> 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: _____

Little League[®] Baseball & Softball
CLAIM FORM INSTRUCTIONS



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 NUFI 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 NUFI 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. 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)/guardian(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 fourth bill. 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.

11/20/10/10/2010

LITTLE LEAGUE® BASEBALL AND SOFTBALL
ACCIDENT NOTIFICATION FORM
INSTRUCTIONS



Send Completed Form To:
 Little League, International
 539 US Route 15 Hwy, PO Box 3485
 Williamsport PA 17701-0485
Accident Claim Contact Numbers:
 Phone: 570-327-1674 Fax: 570-326-9280

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.	
PART 1			
Name of Injured Person/Claimant	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 <input type="checkbox"/> AM <input type="checkbox"/> PM	Type of Injury
------------------	-----------------------------------------------------------------------------	----------------

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 | <input type="checkbox"/> (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 FROM | |
| | <input type="checkbox"/> JUNIOR (13-14) | <input type="checkbox"/> OFFICIAL SCOREKEEPER | <input type="checkbox"/> TOURNAMENT | |
| | <input type="checkbox"/> SENIOR (14-18) | <input type="checkbox"/> SAFETY OFFICER | <input type="checkbox"/> OTHER (Describe) | |
| | <input type="checkbox"/> BIG LEAGUE (18-18) | <input type="checkbox"/> VOLUNTEER WORKER | | |

I hereby certify that I have read the answers to all parts of this form and to the best of my knowledge and belief the information contained is complete and correct as herein given.

I understand that it is a crime for any person to intentionally attempt to defraud or knowingly facilitate a fraud against an insurer by submitting an application or filing a claim containing a false or deceptive statement(s). See Remarks section on reverse side of form.

I hereby authorize any physician, hospital or other medically related facility, insurance company or other organization, institution or person that has any records or knowledge of me, and/or the above named claimant, or our health, to disclose, whenever requested to do so by Little League and/or National Union Fire Insurance Company of Pittsburgh, Pa. A photostatic copy of this authorization shall be considered as effective and valid as the original.

Date	Claimant/Parent/Guardian Signature (In a two parent household, both parents must sign this form.)
Date	Claimant/Parent/Guardian Signature

For Residents of California:

Any person who knowingly presents a false or fraudulent claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

For Residents of New York:

Any person who knowingly and with the intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the actual 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.

UCLL Form 1000 (Revision 01/2010) **PART 2 - LEAGUE STATEMENT (Other than Parent or Claimant)** (To be completed by the League Official)

Name of League	Name of Injured Person/Claimant	League I.D. Number
Name of League Official	Position in League	
Address of League Officials	Telephone Numbers (ind. Area Codes) Residence: () Business: () Fax: ()	

Were you a witness to this accident? Yes No
Provide names and addresses of any known witnesses to the reported accident.

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

POSITION WHEN INJURED	INJURY	PART OF BODY	CAUSE OF INJURY
<input type="checkbox"/> 01 1ST	<input type="checkbox"/> 01 ABRASION	<input type="checkbox"/> 01 ABDOMEN	<input type="checkbox"/> 01 BATTED BALL
<input type="checkbox"/> 02 2ND	<input type="checkbox"/> 02 BITES	<input type="checkbox"/> 02 ANKLE	<input type="checkbox"/> 02 BATTING
<input type="checkbox"/> 03 3RD	<input type="checkbox"/> 03 CONCUSSION	<input type="checkbox"/> 03 ARM	<input type="checkbox"/> 03 CATCHING
<input type="checkbox"/> 04 BATTER	<input type="checkbox"/> 04 CONTUSION	<input type="checkbox"/> 04 BACK	<input type="checkbox"/> 04 COLLIDING
<input type="checkbox"/> 05 BENCH	<input type="checkbox"/> 05 DENTAL	<input type="checkbox"/> 05 CHEST	<input type="checkbox"/> 05 COLLIDING WITH FENCE
<input type="checkbox"/> 06 BULLPEN	<input type="checkbox"/> 06 DISLOCATION	<input type="checkbox"/> 06 EAR	<input type="checkbox"/> 06 FALLING
<input type="checkbox"/> 07 CATCHER	<input type="checkbox"/> 07 DISMEMBERMENT	<input type="checkbox"/> 07 ELBOW	<input type="checkbox"/> 07 HIT BY BAT
<input type="checkbox"/> 08 COACH	<input type="checkbox"/> 08 EPIPHYSES	<input type="checkbox"/> 08 EYE	<input type="checkbox"/> 08 HORSEPLAY
<input type="checkbox"/> 09 COACHING BOX	<input type="checkbox"/> 09 FATALITY	<input type="checkbox"/> 09 FACE	<input type="checkbox"/> 09 HITTED 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 LUNGTUBE	<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 STROKE	<input type="checkbox"/> 17 LIPS	<input type="checkbox"/> 17 UNKNOWN
<input type="checkbox"/> 18 TOWARD GAME	<input type="checkbox"/> 18 OTHER	<input type="checkbox"/> 18 MOUTH	
<input type="checkbox"/> 19 UMPIRE	<input type="checkbox"/> 19 UNKNOWN	<input type="checkbox"/> 19 NECK	
<input type="checkbox"/> 20 OTHER	<input type="checkbox"/> 20 PARALYSIS	<input type="checkbox"/> 20 NOSE	
<input type="checkbox"/> 21 UNKNOWN	<input type="checkbox"/> 21 PARAPLEGIC	<input type="checkbox"/> 21 SHOULDER	
<input type="checkbox"/> 22 WARMING UP		<input type="checkbox"/> 22 SIDE	
		<input type="checkbox"/> 23 TEETH	
		<input type="checkbox"/> 24 TESTICLE	
		<input type="checkbox"/> 25 WRIST	
		<input type="checkbox"/> 26 UNKNOWN	
		<input type="checkbox"/> 27 FINGER	

Does your league use 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: _____

CONDITIONING INTRODUCTION

A large percentage of sport injuries are preventable. Careful planning and coaching are the first steps to minimizing these injuries.

Sport injuries occur more frequently under the following conditions:

1. When the players are in poor condition.
2. When the players have poor fundamental skills.
3. When the practices are poorly organized.
4. When the safety equipment is not worn or does not fit properly.

The following sections outline simple guidelines and techniques which may help in the prevention of sport injuries. It is recommended that these guidelines and techniques be reviewed periodically to insure that a maximum effort is being made to reduce sport injuries.

Statistics show that well-conditioned players are less frequently injured than players in poor physical condition. Your players should be in good condition before competition begins. Three weeks of practice are recommended before the first game.

A good conditioning program consists of stretching, calisthenics, and a progressive warm-up for each of the skills to be performed by the players. At least 15 minutes at the start of your practices and games should be devoted to conditioning. Players coming off the bench during a game should warm-up before playing.

The first three sections are intended to familiarize you with a variety of exercises and techniques for stretching, calisthenics and a progressive warm-up. The fourth and fifth sections will provide you with a guideline for organizing a conditioning program for your players.

STRETCHING

Stretching exercises are an important part of sport injury prevention. Stretching provides the player with the following benefits:

1. Increases the player's range of motion helping to prevent muscle tears caused by inflexible joints and tight muscles.
2. Helps the player's coordination by allowing freer movement.
3. Helps prevent poor mechanics caused by inflexible joints and tight muscles.
4. Establishes good habits helping to maintain flexibility into the adult years.

How to Stretch:

Stretching is easy to learn. However, there is a right way and a wrong way to stretch. NEVER bounce up and down or stretch to the point of severe pain. The following techniques should be used:

1. When a player begins stretching, he or she should spend 5-12 seconds holding the position. The player should stretch to the point of mild tension and should relax while holding the stretch. NO BOUNCING!
2. Repeat all stretches at least 2 times.
3. Exercise both sides of the body.
4. Stretch all major muscle groups.
5. Never hold the breath while stretching.
6. Check that players are doing the stretches correctly.

STRETCHING EXERCISES**Shoulder Stretches:**

Interlace the fingers above the head. With palms facing upward, push the arms slightly back and up.
Grasp the hands behind the back. Slowly lift the arms. Do not bend at the waist.

Tricep Stretch:

Place the elbow of one arm behind the head, fingers pointing down. Hold the elbow with the other hand. Gently push the elbow downward.

Waist Stretch:

Begin with the same position as exercise no. 3. Gently push the elbow downward while bending from the hips to the side. Keep the knees slightly bent.

Arm Stretch:

Grasp the left elbow with the right hand. Gently pull the left elbow across the chest to the right. Repeat on the other side.

Hurdle Stretch:

Straighten one leg and bring the opposite foot to the inside of the straight leg. Slowly bend forward toward the foot of the straight leg. Do not bend the knee. Repeat on the other side.

Foot Circles:

Lift one foot towards the chest, bending at the knee. Rotate the ankle in both directions through as large a circle as possible. Rotate foot 10 times in each direction.

Groin Stretch:

Put the soles of the feet together and hold onto the ankles. Push forward from the hips, while gently pressing the elbows on the knees. Do not round the shoulders.

Hip Stretch:

Move one leg forward until the knee is directly over, the ankle. The other knee should be behind and on the ground. Push the hips downward without changing position. Repeat on the other side.

Quad Stretch:

Lie flat on the stomach. Grasp the outside of the left ankle with the left hand. Pull the foot closer to the buttocks and hold. Keep the shoulder in line with the knee. Repeat on the other side.

Buttocks Stretch:

Lie with back flat on the ground. Bend one knee to the shoulder, keeping the other leg flat on the floor. Repeat on the other side.

Hamstring Stretch:

Lie with back flat on the ground. Raise one leg as high as possible without bending it. Keep the knee of the other leg bent. Repeat on the other side.

Calf Stretch:

Lean forward against a support (wall, fence, backstop, etc.). Place one leg behind the other, keeping the heel of the back leg in contact with the floor, toe pointing forward and knee straight. Slowly lean forward from the hips, until a stretch is felt in the calf of the rear leg (do not lift heel.)

CALISTHENICES

Once stretching has increased range of motion, calisthenics should be performed. Calisthenics help to increase body temperature, promote circulation and prepare the body for strenuous activity. A combination of the following calisthenics or any others may be used for general warm-up:

1. **ARM CIRCLES** (while jogging in place):
Circle the arms forward and backward in large and small circles.
2. **JOGGING** (knees high):
Jog in place, bringing the knees up as high as possible.
3. **JUMPING JACKS**:
Start with the feet together, arms at side. Jump, landing with the feet shoulder width apart, while bringing arms over head. Return to starting position.
4. **SKIER**:
Begin with both feet together. Jump side to side.
5. **JUMPING**:
With both feet together, jump straight up.
6. **BOX JUMP**:
With both feet together, jump forward, left, back, right. After several jumps in one direction, reverse direction.
7. **CURL-UPS**:
Lie with the back and feet flat on the ground, knees bent. Raise the shoulders and head as far off the floor as possible, while keeping the lower back on the ground.

PROGRESSIVE WARM-UP

A progressive warm-up for each of the skills to be performed by the player is necessary. The following warm-ups are suggested for baseball players:

1. **JOGGING**:
The distance will vary according to the age of the players.
2. **SPRINTING**:
To prepare the player for base running—Relays are a fun and effective activity for practicing sprinting (involves as many players as possible – avoid having players waiting around for their turn).
3. **THROWING AND CATCHING**:
Divide into pairs. Face each other and gently throw the ball back and forth. Starting distance between pairs will vary according to the age of the players. Work on accuracy rather than speed. Every 2-3 throws, take several long steps backwards. Continue throwing and catching in this manner.

Three stations can be set up for the progressive warm-up. Divide the team into three groups, placing each group at one station. Rotate groups through all three stations.

SETTING UP A CONDITIONING PROGRAM

Conditioning program will vary from age group to age group due to physiological differences. The heart and lungs of younger children (5-9)* are not fully developed and thus, these children lack endurance capabilities. Therefore, younger children are only capable of participating in activities of limited distance or duration (running, etc.). In addition, the bone structure of this age group is relatively soft and supple allowing them tremendous flexibility. Consequently, children 5-9 years of age need only be involved in limited stretching. Perhaps of greatest importance with this age group is to establish good conditioning habits which will become essential during their later playing years.

The lungs and heart of children 10 years and older are in size and capacity proportionate to their height and weight gains. These children can therefore participate in activities of longer distance or duration. For children 10-14 years of age, more stretching should be added to their program, although these children are still fairly flexible.

As children grow into the adolescent years, they begin to lose joint flexibility if it is not regularly maintained. Older players (15+) should therefore spend more time stretching. This age group can also participate in activities of longer distance or duration than the younger age groups. Individual conditioning programs outside of practice are beneficial for the older players. Stretching, aerobic/anaerobic training (sprinting or distance running, swimming, cycling, etc.) and weight training provide the player with a well-rounded conditioning program. Individual conditioning programs should be carefully designed for the players. Injury prevention in all of these activities must be a primary consideration.

When designing your conditioning programs, remember to make the exercises fun. The following techniques can make exercising more enjoyable:

- Partner exercises and drills
- Relays
- Allowing the players to give exercises nicknames
- Allowing the players to effectively lead exercise.

Some players will deviate physiologically from this general age group division (by their size and/or their coordination). These players may require special attention or should be moved into a different age group division.

SUGGESTED CONDITIONING PROGRAM FOR AGE GROUP 5-9

EXERCISE	COMMENTS
1. Stretches	Hold ALL stretches 5-8 counts. Repeat all stretches twice.
2. Shoulders	No bouncing!!
3. Triceps	Stretch both arms. Be sure players stretch correctly.
4. Hurdle	Stretch both legs. Establishment of good habits is important!
5. Foot Circles	Circle both feet 5 times.
6. Buttocks	No Bouncing!!
7. Hamstring	Keep raised leg straight!
CALISTHENICS	
1. Arm Circles	Circle each arm 10 times.
2. Jogging	Alternate left and right knees 10 times each
3. Jumping Jacks	10 times
4. Curl-UP	10 times.
PROGRESSIVE WARM-UP	
1. Jog	5-6 yrs old jog once around the outside of the bases 7-9 yrs old jog 1 ½ to 2 times around the outside of the bases.
2. Walk	For a few minutes.
3. Sprinting	2-4 times the distances of the bases (can use relays)
4. Throwing and Catching	
5. Swinging a Bat	

SUGGESTED CONDITIONING PROGRAM FOR AGE GROUP 10-14

EXERCISE	COMMENTS
1. Stretches	Hold ALL stretches 8 counts. Repeat all stretches twice.
2. Shoulders	No bouncing!!
3. Triceps	Stretch both arms. Be sure players stretch correctly.
4. Arm	Pull arm gently.
5. Hurdle	Stretch both legs. Establishment of good habits is important!
6. Foot Circles	Circle both feet 8 times.
7. Buttocks	No Bouncing!!
8. Quads	Keep the knee in line with the shoulder.
9. Hamstring	Keep raised leg straight!
CALISTHENICS	
1. Arm Circles	Circle each arm 10 times.
2. Jogging	Alternate left and right knees 10 times each
3. Jumping Jacks	10 times
4. Skier	10 times, left and right
5. Curl-UP	15-25 times.
PROGRESSIVE WARM-UP	
1. Jog	2 times around the outside of the bases or one time around the field.
2. Walk	For a few minutes.
3. Sprinting	4-6 times the distances of the bases (can use relays)
4. Throwing and Catching	
5. Swinging a Bat	

SUGGESTED CONDITIONING PROGRAM FOR AGE GROUP 15 and older

EXERCISE	COMMENTS
1. Stretches	Hold ALL stretches 8 counts. Repeat all stretches twice.
2. Shoulders	No bouncing!!
3. Triceps	Stretch both arms. Be sure players stretch correctly.
4. Arm	Pull arm gently.
5. Waist	Stretch both sides.
6. Hurdle	Stretch both legs. Establishment of good habits is important!
7. Foot Circles	Circle both feet 8-10 times.
8. Groin	Keep the back straight.
9. Hips	Keep the knee over the ankle.
10. Buttocks	No Bouncing!!
11. Quads	Keep the knee in line with the shoulder.
12. Hamstring	Keep raised leg straight!
13. Calf	Keep back leg straight.
CALISTHENICS	
1. Arm Circles	Circle each arm 10 times.
2. Jogging	Alternate left and right knees 10 times each
3. Jumping Jacks	10 times
4. Skier	10 times, left and right
5. Jumps or Box Jumps	10 jumps or 2 box jumps in each direction.
6. Curl-UP	25-40 times.
PROGRESSIVE WARM-UP	
1. Jog	2-4 times around the outside of the bases or 1-2 times around the outside of the field.
2. Walk	For a few minutes.
3. Sprinting	6-8 times the distances of the bases (can use relays)
4. Throwing and Catching	
5. Swinging a Bat	

Adapted from ASAP, Safety Awareness Program, Oskaloosa, Iowa, 1997

Warm-Up Drills

The subject of warming up before a practice session has been covered as a means of safeguarding youngsters, at least to a degree, from poor physical condition and lack of limbering up.

Use of the term “warming-up drills,” in connection with unsafe acts, refers to ball handling practice rather than calisthenics. This involves a serious accident exposure to misdirected balls. The following will reduce the danger of being struck by a misdirected ball:

1. All unauthorized people should remain off the field during drills.
2. After the number of targets has been reduced to minimum, one of the best preventive measures is to stress that the eye must be kept on the ball. This safe practice should be drilled into both adults and youngsters so continuously that it becomes a reflex action.
3. Another danger from misdirected balls is the exposure of inexperienced batters to wild pitchers. The use of batter’s helmets is a must. However, it does not justify permitting a potential pitcher throwing to an inexperienced batter until control is demonstrated.
4. The danger of being struck by a ball can be further minimized by the following plan:

- (a) Throwing and catching drills should be set up with players in two lines facing one another.
- (b) Random throwing should be permitted only to designated players.

Safe Ball Handling

1. Misjudging the flight of a batted ball may be corrected by drilling with flies which begin easy and made more difficult as a player’s judgment and skill improves. Everyone should eventually be able to handle balls that go overhead.
2. In addition to a player never losing sight of a ball from the time it leaves the bat, the player should keep the glove positioned and the body relaxed for a last split-second move.

3. An infielder can best be protected by an aggressive short-hop fielding play by always keeping the “nose pointed at the ball” and the eyes glued on it. Also, if moving forward, the player is in a better position to make a throw.
4. It is safer for the player to knock a ball down and rehandle it then to let the ball determine the play.

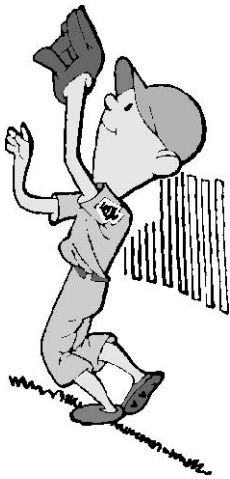
Collisions

Collisions result in more injuries than is the case with most other types of accidents. They are usually caused by errors of judgment or lack of teamwork between fielders. It is important to establish zones of defense to avoid collisions between players. It is particularly important when players are chasing high fly balls. Once the zones are established, play situation drills should be held until these zones and patterns become familiar to the players. The responsible player should call out the intentions in a loud voice to warn others away. Here are some general rules to follow:

1. The fielder at third base should catch all balls which are reachable and are hit between third and the catcher.
2. The fielder at first base should catch all balls reachable which are hit between second and the catcher.
3. The shortstop should call all balls reachable which are hit behind third base.
4. The fielder at second base should catch all balls reachable which are hit behind first base.
5. The shortstop has the responsibility for fly balls hit in the center of the diamond and in the area of second base. Since the glove is on the left hand it is easier for the shortstop than the fielder at second to catch fly balls over second base.
6. The centerfielder has the right of way in the outfield and should catch all balls which are reachable. Another player should take the ball if it is seen that it is not reachable by the centerfielder.
7. Outfielders should have priority over infielders for fly balls hit between them.
8. Priorities are not so easy to establish on ground balls, but most managers expect their base player to field all ground balls they can reach, cutting in front of the shortstop on slow hit grounders.
9. The catcher is expected to field all topped and bunted balls which can be reached except when there is a force play or squeeze play at home plate.

Warning Track

In addition to collisions between players, occasionally a player chasing a fly ball will crash into the fence. These accidents also can be controlled by suitable drill work. In this case it is simply a matter of giving the outfielders an opportunity to practice getting the feel of the warning track under their feet. They must learn to judge their distance from the fence and the probable point where the ball will come down. It would be worse than futile to not only miss catching the ball by a wide margin but also be injured by a collision with the fence.



Retrieving Balls

Balls that go out of the park should be retrieved by persons who have been specifically assigned to that duty. Such persons should be youngsters who can be relied on not to endanger themselves by climbing fences or getting into a scramble for possession of a ball.

Keep Grounds Clear

Another duty that should be given in turn to alert substitute players is the picking up of bats and proper placement in the rack. The clearing up of other loose playing equipment should be included in this assignment.

Sliding Safety

As is the case with other baseball fundamentals, a correct slide is also a safe one. It is well, too, to guard against the accident of a

collision and the possibility of a player being struck by a thrown ball as that player “hits the dirt.” It goes without saying that steel spikes are not being worn. The following can make the learning period safer:



1. Long grass has been found to be better than a sand or sawdust pit to teach sliding.
2. The base must not be anchored down.
3. Sliding pads are recommended.
4. The player should make approaches at half speed and keep constantly in mind that hands and feet should be in the air. Once committed to slide, the player must not change strategy. Last minute hesitation causes most sliding injuries.
5. Tennis shoes are suggested for beginning sliding and tagging practice to avoid injury to the defensive player.
6. If the ground along the baselines becomes soft on a rainy day, such weather offers an excellent opportunity to have sliding drills.
7. It should be kept in mind that head-first sliding* is not recommended except when returning to a base.

*Head-first sliding has been eliminated for ages 12 and below, except for when returning to base

Batter Safety

A batter’s greatest accident exposure is from the unsafe acts of others, namely wild pitches, which account for a major portion of all accidents. Again, the best defense is an alert, confident concentration on the ball. This type of injury is more prevalent in Regular than in Minor League play. Since the danger is increased as pitchers learn to throw with greater force and as more games are played, it is doubly important to take whatever counter measures necessary to offset this exposure.

1. A well-fitted, NOCSAE approved helmet is

the first requirement.

2. The development of the novice batter's ability to take evasive action can be improved by getting the player to relax and concentrate on the ball from the time the pitcher starts delivery until it lands in the catcher's mitt. Players with slow reflexes can also be helped by stimulated batting and ducking practice with a tennis ball.

3. The unsportsmanlike practice of crowding the plate or jumping around to rattle the pitcher must not be tolerated. This could endanger the batter if it causes the pitcher to lose control. Umpires should stop such actions.

4. Painful finger and hand injuries can be reduced by making sure the batter holds the bat correctly when bunting. Youngsters have a tendency to lean too far over the plate and not keep the ball well out toward the end of the bat. This should be corrected.

5. When the batter becomes a base runner, that player should be taught to run outside the foul lines when going from home plate to first and from third to home, to reduce the chance of being hit by a thrown ball.

Safe Handling of Bats

A review of the batter's potential for causing injuries to others points up the following:

1. The most easily prevented type of accident is the too frequent fault of beginners throwing the bat while running to first base. This unthinking act may be corrected through individual instruction to drop the bat safely by:

(a) Having the player hand the bat to the coach will serve as a reminder before each ball is pitched.

(b) Having the player drop the bat in a marked-off circle near where running starts.

(c) Counting the player "out" in practice whenever the player fails to drop the bat correctly.

(d) Providing bats with grips that are not slippery.

2. Coaches and umpires should be on the alert to correct batters that have a tendency to step into the catcher as they swing.

A Dangerous Weapon

We use this heading to note the seriousness of

an accident exposure that may sound impossible but one which has caused several very serious accidents on several occasions. The preceding precautions apply to the actions of individuals who should have control over the bat they are using.

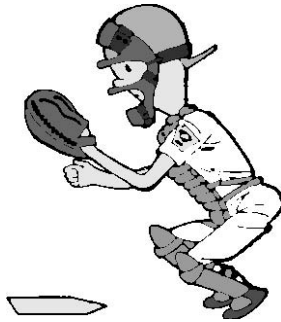
A more serious injury is waiting for the absent-minded youngster who unconsciously walks into the swing of the coach's bat when the coach is hitting flies, or the equally unwary player who walks into the swing of a player in the on-deck circle*. These situations demonstrate the need for everyone to become safety-minded, not only for their own good but also for the safety of others. The following precautions are suggested:

1. The player, usually a catcher, assigned to catching balls for the coach hitting flies should be given the specific assignment of warning away anyone who comes too close.
2. All players and adults should be trained to walk around the on-deck circle* whether it is in use or not. The ingrained safety habit of keeping clear may save someone a painful injury.

* On-deck areas have been eliminated for ages 12 and below.

Catcher Safety

1. The catcher, as might be expected from the amount of action involved has more accidents than any other player. Statistics show that the severity of injuries is less in Regular than in Minor League play. Again, this bears out the fact that the more proficient the player, the less chance of injury. Assuming that the catcher is wearing the required protection the greatest exposure is to the ungloved hand. The catcher must learn to:



- (a) Keep it relaxed.
 - (b) Always have the back of the throwing hand toward the pitcher when in position to catch.
 - (c) Hold all fingers in a cupped position near the mitt, ready to trap the ball and throw it.
2. The catcher should also be taught to throw the mask and catcher's helmet in the direction opposite the approach in going for a high fly.
 3. As the catcher learns to play this difficult position, a good habit is to keep a safe distance back from the swinging bat. Estimate this as one foot farther from the batter than the ends of the outstretched fingers.
 4. To repeat, the best protection is keeping the eye on the ball.

General Inattention

Going one step back to the "whys" of most ball handling accidents, it appears that inattention due to inaction or boredom is an underlying accident cause with which we must deal. This situation can be partly offset by using idle time to practice basics of skillful and safe play, such as:

1. Otherwise idle fielders should be encouraged

to "talk it up." Plenty of chatter encourages hustle and enthusiasm.

2. Players waiting for a game or practice to start can pair off and play catch to improve their basic eye-on-the ball technique.
3. Practice should include plenty of variety in the drill work.
4. Put a time limit on each drill and do not hold the total practice for more than two hours, or less if interest begins to lag.
5. Idle players along the sidelines can be given the job of studying the form of other players to improve their own techniques. They may then report on what they have learned to improve their own form on running, ball handling, throwing, batting and sliding.

Control of Horseplay

No discussion of measures to control the human element in accident-prevention would be complete without going into the problem of horseplay. This includes any type of youthful highjinks that could even remotely be the cause of an accident. Even a mild form of such childish behavior could distract any player about to catch a ball or possibly when at bat, and result in an accident. After all—team play requires 100% cooperation among all players, and good sportsmanship demands courtesy to opposing players.

If show-offs and smart-alecks cannot find sufficient outlet for their high spirits in the game, quick and impartial disciplinary action must be taken.

HAZARDS IN TRAVEL TO AND FROM FIELD

Little League is also concerned for the safety of players and team officials on the way directly to and from the field. Since these adults are mature people with a good sense of responsibility, it is not surprising they have had very few mishaps while going to and from their volunteer baseball jobs. Youngsters however, are likely to take a more lighthearted view of these accident exposures.

Upon examination, it is obvious that this hazard is no worse than the everyday exposure of going to and from school, the playground or

elsewhere. However, this does not relieve us in the least from looking out for their safety while on Little League “business.”

Accident Exposures

A quick examination of our problem leads us to separate these exposures into two broad classifications; namely, traffic safety and the various temptations resulting from youthful curiosity and a desire for adventure. In the field of insurance law, the latter type are known as “attractive nuisances.” They range anywhere from an easy-to-climb tree to a boat that has been left without being chained and padlocked.

Travel Hazards

Although Little League traffic accidents involve only one or two cases for every hundred injuries from all accidents, the average severity of these accidents far exceeds those from other causes.

The alarming country-wide increase in all traffic accident deaths has made the publicity on these losses a natural crusade. This staggering annual increase indicates the public conscience has become hardened, not only to these needless fatalities but also to the tragic probability that millions will be seriously injured as the result of traffic accidents in the years to come. Too often we assume that it cannot happen to us or our loved ones until it is too late to prevent a crippling or fatal injury. In Little League we have not only an opportunity but an obligation to take organized action for the protection of our own interests. Let’s do something about it.

General Accident Prevention

First, let’s look at what can be done to implant the basic principles of traffic safety in the thinking of our adults and particularly our players.

1. In any meeting or gathering where adults are brought together, they should be reminded repeatedly of their responsibility to:
 - (a) See that all passengers use seat belts. Do not carry passengers in cargo areas of vans and pick-ups.
 - (b) See that their vehicles are in safe operating condition.
 - (c) Observe traffic regulations.
 - (d) Drive defensively.
2. Youngsters who are walking to or from the field should be reminded by their parents, managers and coaches to:

- (a) Not hitch rides.
- (b) Use street or highway crossings protected by lights as much as possible.
- (c) Always walk in single file off the roadway, and on the side against the flow of traffic where there are no sidewalks.
- (d) Wear light-colored clothing and carry a flashlight when walking along a road after dark.
- (e) Be just as alert to the dangers of moving traffic when in a group as when alone. Do not depend on others.
- (f) Observe bicycle safety rules such as those listed in the next section.

Bicycle Safety

In spite of the nationwide increase in the popularity of bicycling, the number of accidents to riders has not increased as rapidly as is the case with other types of traffic accidents, thanks to the emphasis that has been placed on bike safety. It is estimated there are over 57 million bike riders in America. Still, our country is faced with hundreds of fatalities and thousands of disabling injuries each year from bicycle mishaps. We should be concerned that 4 out of 5 of these accidents are to young people in the 5 to 15 year age bracket.

Since bike riding is generally the most popular way for Little Leaguers to travel to and from the playing field, place more emphasis on bicycle traffic safety.

Bicycle Accident Prevention

As in the case of discovering and correcting the causes of player accidents, let’s examine the major causes of bike accidents and what can be done to offset them.

1. According to the National Safety Council, 15% of all fatal bike accidents nationwide did not involve motor vehicles. In general, they were “spills” caused by:
 - (a) Slippery or rough riding surfaces.
 - (b) Defective bicycles.
 - (c) Collisions with pedestrians or fixed objects

A significant number of bicycle accidents that resulted in injuries could have been prevented by keeping the bikes in good mechanical condition, better rider skills and the observance of bike safety rules.
2. The remaining 85% of fatal accidents involving collisions between motor vehicles and bicycles were analyzed by the National Safety Council as follows:
 - (a) One-half occurred at intersections.

- (b) Seven out of ten were during daylight hours.
- (c) Four-fifths of the cyclists killed or injured were violating a traffic law.

They were:

- (1) Failing to yield the right of way.
 - (2) Riding in center of street.
 - (3) Speed too fast for conditions.
 - (4) Disregard for traffic control devices.
 - (5) Riding against traffic.
 - (6) Improper turning.
- (d) Additional responsibility by the car drivers is indicated by the fact that many accidents involve violations by the auto vehicle drivers.
- (e) In one of five cases, the bicycle had a mechanical defect that could have caused the accident.

Since we can do very little to control violations by motor vehicle drivers it is doubly important to have some assurance that: (1) the bikes will be in good condition, including suitable lights and reflectors; (2) the riders will be safety-minded; and (3) they will ride defensively.

3. Having decided on these four objectives, what can be done to implement our bicycle safety program without over-burdening our volunteers? First, it should be noted that the best results have been obtained by safety promotion projects in which the youngsters take an active part. This can be done by getting a local bike shop or a civic-minded organization to sponsor a package program such as the ones offered without charge by the Bicycle Institute of America. It is located at 122 E. 42nd Street, New York, NY 10017. They will provide not only well-tested procedures but such incentives as colorful decals for the bikes and Safety League membership rule cards. Part of the card is shown below.

- 1. Observe all Traffic Regulations** — red and green lights, one-way streets, stop signs.
- 2. Keep to the Right** — ride in a straight line. Always ride in single file.
- 3. Have White Light on Front** — danger signal on rear for night riding.
- 4. Have Satisfactory Signaling Device** to warn of approach.
- 5. Give Pedestrians the Right-Of-Way.** Avoid sidewalks — otherwise use extra care.
- 6. Look Out for Cars Pulling Out Into Traffic.** Keep sharp lookout for sudden opening of auto doors.
- 7. Never Hitch on Other Vehicles** — do not “stunt” or race in traffic.
- 8. Never Carry Other Riders** — carry no

packages that obstruct vision or prevent proper control of cycle.

9. Be Sure Your Brakes Are Operating Efficiently — keep your bicycle in good running condition.

10. Slow Down At All Street Intersections — look to right and left before crossing.

11. Always Use Proper Hand Signals — turning and stopping.

12. Don’t Weave In Or Out of Traffic — Do not swerve from side to side.

Suggested bike safety programs are:

- (a) Safety inspection of all bikes by a qualified service mechanic.
 - (b) Testing of individual youngsters for: balance, changes in direction, traffic control, pedaling and braking, maneuvering, mounting, obstacles, emergency stops, turning, signaling and proper care of bike.
 - (c) Rodeo, which is similar to the testing program except that the participants are scored on their knowledge of bike safety and execution of various maneuvers while competing for prizes. This could be made more exciting by having the various teams in each league compete against each other.
4. Another effective way to impress youngsters with the importance of observing traffic safety rules is to have a safety representative from your local law enforcement agency talk briefly to each Little League group, following a practice or game. Youngsters may be impressed by the importance of traffic safety rules which are explained by an officer, such as a state trooper, in uniform.

Prevention of Other Going-and-Coming Accidents

As mentioned at the beginning of this chapter, our Little Leaguers are exposed to other accidents while traveling to and from the ball field.

These accidents, which can be very serious, are a difficult type to prevent. The youngsters are usually out of touch with adult guidance when they get an impulse to climb a tree, throw a stone, watch a construction job, try out someone’s motor bike, play in the water or otherwise express their natural curiosity and

spirit of adventure. Unfortunately, some of their impulsive actions have led to disastrous results.

Possible Preventative Measures

1. The most positive approach, and probably the most effective, is appealing to their loyalty to the Little League uniform or cap. Parents, managers and coaches should impress upon them that their behavior along the way will give other people a good or bad impression of Little League, depending on how they act.
2. Youngsters should also feel the restraining effect of orders to go directly to the field and report to their manager or coach. The same order should apply to going straight home and checking-in with their parents.
3. As an indirect precaution, parents should be encouraged to have their youngsters learn how to swim. This is particularly important if there are any bodies of water within striking distance of their route. This knowledge may save their lives when temptation is stronger than the such activities as climbing trees, chasing each other, voice of authority. running up and down the grandstands, etc.
4. A surprising number of accidents also occur when youngsters reach the vicinity of the field but it is not yet time for practice or a game. In this situation it is the direct responsibility of any adults who are nearby to stop.
5. Volunteers should make local authorities aware of potential risks in the area, ie. unfenced excavation or quarries and lakes with unsecured boats.

ORGANIZING PRACTICES

Well-organized practices help to minimize injuries. Injuries are more likely to occur when players are unaware of what they should be doing, uninvolved in some form of activity or are bored with an activity. Being well-organized and keeping the players active and interested during the practices will greatly reduce the risk of player injury.

The following guidelines are recommended for organizing practices:

1. PLAN YOUR SEASON

Make a list of all the activities you need to cover during the season. Using a season calendar, tentatively slot those activities into each of your practice seasons.

2. PLAN YOUR PRACTICES

Write out a more specific plan before each practice session. When planning individual practice sessions, begin by listing:

- a. Your objective (what you want to accomplish – e.g. sliding techniques, signs, etc.).
- b. Skills to be reviewed (skills your players have already learned).
- c. New skills to be learned. Plan appropriate drills for each skill and record the approximate time necessary for each.

3. CHOOSE APPROPRIATE LENGTH OF TIME FOR PRACTICES

The mind and body function effectively within certain time limitations. Time spent practicing beyond this point results in an ineffective learning situation. Younger players should never practice more than one hour. Certainly any practice over two hours is too long for most players of any age.

4. USE GOOD COACHING TECHNIQUES.

The following is a list of helpful coaching/teaching tips:

- a. Be sure the skills you select are appropriate for the age/skill level of the players.
- b. Carefully explain each drill/activity (invite player questions).
- c. Review key points for each practiced skill.
- d. Never practice a skill to the point of boredom. Come back to troublesome skills later in the practice or some other day.
- e. Limit the number of corrections given at one time to a player. The less skilled and/or younger player can only process a few corrections at one time.
- f. Always give feedback regarding specific aspects of the skill, for example, “the follow through was correct” rather than just “good job!” or “try to stride out on the ball of your foot next time” rather than just “that was wrong, try again!”
- g. Use stations or drills involving all players when working on skill development. This keeps the players moving, is more fun for the players, enhances learning, and avoids injuries caused by boredom. Plan all drills and stations with regard to field constraints, supervision, and safety.
- h. Never use physical activity as a form of punishment. Players begin to associate such physical activity as being an undesirable activity. Later in life, this often results in negative attitudes towards physical activity in general. Reward those players who behave appropriately by allowing these players to bat first or drink water first, etc.

Sample list of season activities:

Offensive skills: Throwing & Fielding; Base Running, Sliding, & Leading; Bunting; Squeeze & Fake Bunt; Batting; Pitching; Catcher Throw & Catch; Fly Balls

Defensive skills: Bunts; Steals; Covering bases; Backing-up; Relay Throws; Throwing Ahead of Runner; Outs at First Base; Force Outs; Pop Flies; Ground Balls; Extra Base Hits; Rundowns; Pick-Off Plays; Wild Pitches; Positioning; Signals; Equipment Fitting

INJURY PREVENTION SKILLS

In many instances proper skill not only improves player performance, but also helps to prevent injury. The purpose of this section is to familiarize you with those fundamental skills which are directly related to injury prevention.

Hitting

Holding the bat incorrectly can injure the portion of the hand between the thumb and the index finger. The bat should not be held in the palm of the hand, but instead should be gripped at the base of the fingers.

Batter must avoid wild and unsafe throws when running to base.

Catching by Catcher

Protect bare hand at all times.

Nobody on Base— Bare hand behind back. Stance should be comfortable and balanced.

Runner on Base—Fingers closed but relaxed (thumb inside fingers). Bare hand behind glove.

Blocking the Ball—Chin tucked. Lean into ball. Eyes on ball. Center ball on chest. Both knees down. Bare hand behind glove.

Foul Tips

To avoid tripping over the mask, the catcher should hang onto the mask until the ball has been sighted and the catcher is in position. The mask may then be tossed aside while preparing to catch the ball.

Sliding

Practice sliding on grass without shoes. Keep the bases loose during sliding practice. Fingers closed (thumb inside fingers). Keep hands in the air. Slide on buttocks. Tuck one leg under opposite knee. Lift and extend forward leg towards the bag. Start slide 6 feet from base.

Tagging a Runner

Keep bare hand out and away from runner. Hold glove at chest level, sweep glove over runner as he or she comes into base. Straddle base if possible. Back of glove facing runner.

Pitching and Throwing

Continuous repetitive stress on the arm can permanently damage the epiphyseal plates which are located at the ends of the long bones where growth occurs during childhood (see diagram below). The damage is thought to occur because the child's musculature is insufficient to absorb the energy produced when throwing a baseball. The more a child throws a ball, the greater the trauma to the bone. Throwing curve balls increases this joint trauma. Throwing stressful pitches such as curve balls will also increase the young pitcher's chance of damaging the arm.

Pitching and throwing injuries also result from improper throwing mechanics. A player using incorrect mechanics places excess stress on the throwing arm and this can result in an overuse injury. Throw with the entire body, not just the arm.

The following procedures will greatly reduce a young pitcher's chances of developing arm injuries:

1. Make sure the pitcher uses proper throwing mechanics.
2. Restrict the number of consecutive innings and days a player pitches.
3. Make sure that 15 year old and younger **do not** throw curve balls, sliders and screw balls.

Be sure players throw with the entire body and not just the arm.

Wind up— Eyes on target. Front shoulder on target. Extend throwing arm, hand on top of the ball. Front hip on target. Land on inside ball of foot (Do not land on heel of foot). Step straight out, foot towards target (land consistently in same area).

Follow-Through—Drive glove hand towards hip. Body completes forward lean. Elbow of throwing arm crosses to opposite knee.

Training Reference Materials

To help you better organize your practices, a list of references containing baseball drills has been provided. Many of these books can be found in your local library.

Alston, W., Weiskopf, D. *The Complete Baseball Handbook*. Allyn and Bacon, Inc., Boston, MA, 1972.

Allen, A. *Handbook of Baseball Drills*. Prentice-Hall, Inc., Englewood Cliffs, NJ, 1959.

Bertman, S. *Coaching Youth League Baseball*. Kaufman Press, Miami, FL, 1975.

Bethel, D. *Coaching Winning Baseball*. Contemporary Books, Inc., Chicago, IL, 1979.

Depel, J. *The Baseball Handbook for Coaches and Players*. Charles Scribner's Sons, New York, NY, 1976.

Herbold, J. *Illustrated Guide to Championship Baseball*. Parker Publishing Company, Inc., West Nyack, NY, 1967.

Herzog, R. *The Coach's Pocket Planner*. Sportsrite Publishing Co., Seattle, WA, 1983.

Hoehn, R. *The Complete Book of Baseball Drills*. Parker Publishing Company, Inc. West Nyack, NY, 1977.

Occor, D. *Coaching Baseball in the Seventies*. Sports World Publishing Company, An Arbor, MI, 1971.

Stockton, B. *Basic Baseball Designed for the Young Ball Player*. Bragg Stockton, 1967.

Required Training

Manager and Coaches Training

University City Little League will provide various training sessions throughout the season to its managers and coaches. Training sessions will include teaching the fundamentals of the baseball including proper sliding, hitting, pitching and fielding, sportsmanship, the rules of the game and field preparation, safety and first aid training.

For the 2011 season, the following meetings will be held. Managers and coaches are required to attend.

Manager / coaches meeting to discuss local league rules. These meetings for each division will be held during the week of Jan. 23 through 29, 2011.

Managers meeting for CPR/ Emergency first Aid, and Automatic Electronic Defibrillator training, run by A-B CPR, at the Standley Recreation Center on Saturday, February 12, 2011 from 9:00 am to 1:00 pm.

Manager / Coaches training clinic. This course will cover teaching techniques for batting, bunting, fielding, hitting, sliding, etc. Big Al Clinic presents the training clinic on Saturday, January 29, 2011 at Clairemont High School.

HEAD LICE—JUST THE FACTS

29 April, 1997

What Are Head Lice? Head lice are insects that live on the human scalp and feed on blood. While feeding, lice inject saliva into the skin which causes itching. An adult head louse lives from 16-30 days. Head lice don't usually spread disease.

Who Gets Head Lice, And how? Anyone can get head lice, especially young school age children. Being clean or dirty has nothing to do with getting head lice. A person with head lice is more likely to them to family members and people with whom they spend a lot of time. A child might get head lice from other children at school or from objects (combs, hats, clothing, etc.) used by persons who have lice.

What Are The Signs of Head Lice? If your child scratches his or her head often or if you hear that people close to you or your children have head lice, check your child's hair for: 1.) Louse eggs (nits) on the hair. They look like tiny oval objects (smaller than the head of a pin) glued to the hair shafts. 2.) Lice and nits among the hair. Look for them near the scalp where the hair is thickest, usually behind the ears and around the nape of the neck. Lice avoid the light. They grow from slightly larger than the nit up to 1/8 inch in length. 3.) Fecal specks on the collar. Specks are more likely to be seen if the hair is long, the collar light-colored and there are a lot of lice.

Hair Casts—They Have Nothing To Do With Head Lice! Hair casts (material from the hair follicles) may be mistaken for nits. A hair cast looks like a small collar or ball and slides easily along the hair shaft.

How To Control Head Lice? If you think your child has head lice, you may wish to see a doctor or a pharmacist. A doctor may prescribe a pediculicide (medicine which kills lice), or tell you to buy an over-the-counter (nonprescription) one. There are many different pediculicides available to treat head lice. Pediculicides available without a prescription include: Nix (the best), R & C Shampoo, Rid Liquid, Triple X liquid, A-200 Pyrinate liquid or gel, & Cuprex liquid. Fine-toothed combs that are good for removing nits include Derbac, Medi-Comb, and Innomed. To loosen the cement that holds nits to hair, many experts recommend rinsing the hair with 50-50 mix of vinegar and water prior to combing and dipping the comb in vinegar before each stroke.

In most cases, ordinary household cleaning and vacuuming will remove nits and lice that have fallen on rugs and furniture. Lice sprays are considered necessary only when the person has a heavy infestation and household items are difficult to clean or vacuum.

Effectiveness of Pediculicides: Not all pediculicides work against all nits even though the label may say they will kill nits. Unless you are sure that you have removed all nits by combing daily for several days after treatment you should re-treat on the 11th day after the first treatment.

Sign Of A Successful Treatment: No new nits will be laid. When first laid, nits are attached to hair near the scalp. As the hair grows, they are moved away from the scalp. By 11 days after a successful treatment, none will be closer than one-quarter inch from the scalp.

How To Control Head Lice on Clothing, Bed Linens, and Furniture: Away from people, lice will usually die within 3 to 10 days. To prevent a person from getting head lice again after treatment: Wash bed linens and clothing in hot water (140 degrees F for 20 minutes), or heat dry clothing in a clothes dryer (hot cycle—155 degrees F for 20 minutes), or dry clean clothing, or store clothing for 30 days in sealed plastic bags. Stuffed animals and other similar toys should also be sealed in plastic bags for a period of two to three weeks.

Ways to Prevent The Spread Of Head Lice: Don't use personal items belonging to others (combs, hair brushes, towels, hats, clothing, etc.) Soak combs, brushes and hair ornaments (barrettes, etc.) of persons with lice in rubbing alcohol for 24 hours. It is also suggested to wear a ball cap under the team's helmet or provide your child with their own league approved helmet.

When Children return to School: Children with head lice are kept out of school until treated.

Clearing Up Some Myths About Head Lice: Being clean won't prevent head lice. Anyone can get them. Head lice can't jump or fly. Head lice come from another person, not from dogs, cats, or other pets. Carpets and furniture are not a good place for lice. No solvent (vinegar, etc.) will effectively remove nits without combing.

Adapted from a brochure by the California Dept. of Health Services, Vector Biology and Control Branch.

Concession Stand Guidelines

'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 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 the 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 has 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. *Ideally*, dishes and utensils should be washed in a four-step process:
 1. Washing in hot soapy water;
 2. Rinsing in clean water;
 3. Chemical or heat sanitizing; and 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 ½ 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.

Clean Hands for Clean Foods

Since the staff at concession stands may not be professional food workers, it is important that they be thoroughly instructed in the proper method of washing their hands. The following may serve as a guide:

- Use soap and warm water.
- Rub your hands vigorously as you wash them.
- Wash all surfaces including the backs of hands, wrists, between fingers and under fingernails.
- Rinse your hands well.
- Dry hands with a paper towel.
- Turn off the water using a paper towel, instead of your bare hands.

Wash your hands in this fashion before you begin work and frequently during the day, especially after performing any of these activities:

- After touching bare human body parts other than clean hands and clean, exposed portions of arms.
- After using the restroom.
- After caring for or handling animals.
- After coughing, sneezing, using a handkerchief or disposable tissue.
- After handling soiled surfaces, equipment or utensils.
- After drinking, using tobacco, or eating.
- During food preparation, as often as necessary to remove soil and contamination and to prevent cross-contamination when changing tasks.
- When switching between working with raw food and working with ready-to-eat food.
- Directly before touching ready-to-eat food or food contact surfaces.
- After engaging in activities that contaminate hands.

It is suggested this memo should be reproduced on your league's letterhead over the signature of your president or safety officer and distributed to the parents of all participants at registration time.

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

WHAT PARENTS SHOULD KNOW ABOUT LITTLE LEAGUE INSURANCE

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:

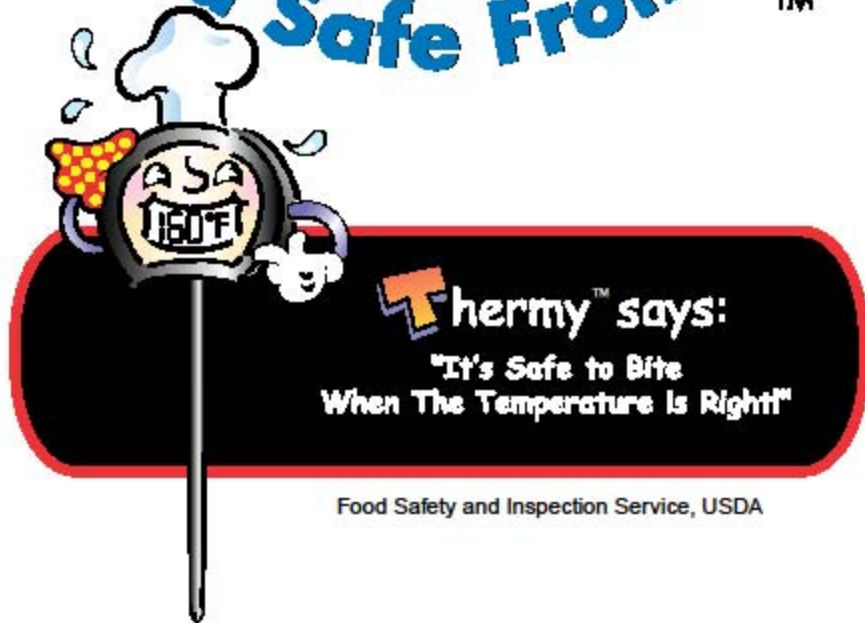
1. The Little League Baseball and Softball accident notification form must be completed by parents (if the claimant is under 19 years of age) and a league official and forwarded directly to Little League Headquarters within 20 days after the accident. A photocopy of the form should be made and kept by 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.



Volunteers Must Wash Hands

HOW



WHEN

Wash your hands before you prepare food or as often as needed.

Wash after you:

- ▶ use the toilet
- ▶ touch uncooked meat, poultry, fish or eggs or other potentially hazardous foods
- ▶ interrupt working with food (such as answering the phone, opening a door or drawer)
- ▶ eat, smoke or chew gum
- ▶ touch soiled plates, utensils or equipment
- ▶ take out trash
- ▶ touch your nose, mouth, or any part of your body
- ▶ sneeze or cough

Do not touch ready-to-eat foods with your bare hands.

Use gloves, tongs, deli tissue or other serving utensils.
Remove all jewelry, nail polish or false nails unless you wear gloves.

Wear gloves.

when you have a cut or sore on your hand
when you can't remove your jewelry

If you wear gloves:

- ▶ wash your hands before you put on new gloves

Change them:

- ▶ as often as you wash your hands
- ▶ when they are torn or soiled

Developed by UMass Extension Nutrition Education Program with support from U.S. Food & Drug Administration in cooperation with the MA Partnership for Food Safety Education, United States Department of Agriculture, Cooperative Extension. UMass Extension provides equal opportunity in programs and employment.





Little League. Volunteer Application -2011

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

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

Name _____ Date _____
 Address _____
 City _____ State _____ Zip _____
 Cell Phone _____ Business Phone _____
 E-mail Address: _____
 Date of Birth _____
 Occupation _____
 Social Security # (mandatory upon request or with LexisNexis) _____
 Employer _____
 Address _____
 Special professional training, skills, hobbies: _____

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

 Previous volunteer experience (including baseball/softball and year): _____

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

Special Certification (CPR, Medical, etc.): _____

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

Have you ever been convicted of or plead guilty to any crime(s): Yes No
 If yes, describe each in full: _____

Are there any criminal charges pending against you regarding any crime(s) involving or against a minor? Yes No If yes, describe each in full: _____

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 Coach Umpire Field Maintenance
 Manager Scorekeeper Concession Stand Other

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

Name	Phone
_____	_____
_____	_____
_____	_____

AS A CONDITION OF VOLUNTEERING, I give permission for the Little League organization to conduct a background check on me, which may include a review of sex offender registries, 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 _____

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):

Sex Offender Registry Criminal History Records *LexisNexis

*Please be advised that if you use LexisNexis 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 directly from LexisNexis 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.

1-03-01-VOLUNTEER APPLICATION 10-05



**UCLL Manager/Coach
Acceptance Letter
2011**

I, _____, accept the position of UCLL manager/coach for the 2011 season and promise to conduct my behavior in accordance with the principles and objectives of Little League baseball.

In addition, while on and off the field, I will, to the best of my ability:

1. Support the mission statement of the league and the league priorities.

Mission Statement:

To provide a safe and fun environment in which children will develop teamwork, sportsmanship, baseball skills, self-esteem, and respect for each other and our community.

Priorities:

1. Safety
2. Sportsmanship
3. Have Fun
4. Development of baseball skills
5. Winning

2. Will give my time equally and fairly to all players.

Signature

Date

Printed Name