Central Amherst Little League

Amherst, New York • Est. 1955

2022 ASAP Safety Plan

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Qualified Safety Plan Requirements

Requirement 1.

League Safety Officer: Nate Shaw. Name/contact info is on file with Little League Headquarters.

Nate Shaw
PH: (716) 359-3601
E-mail: nrs2682@hotmail.com

Requirement 2.

Central Amherst Little League will distribute a copy of this **2021 ASAP Safety Plan** to all Managers/Coaches, League Volunteers, and the District Administrator.

Requirement 3.

EMERGENCY PHONE NUMBER: 911
Local Police Emergency: **911** or 689-1311
Local Fire Emergency: **911** or 839-5000

League President:	Dan Albertson	(205) 534-9826
League Vice President:	Chris Schiller	(716) 359-3501
VP, Challenger League:	Dave Whalen	(716) 908-6770
League Player Agent:	Pat Lester	(716) 479-8196
League Maintenance:	Vince Polino	(716) 523-0432
League Treasurer:	Scott Gretch	(716) 472-1081
League Safety Officer:	Nate Shaw	(716) 359-3601

This list will be posted in the Snack Stand.

Requirement 4.

Central Little League will use the JDP Little league background checks to screen all of volunteers.

Requirement 5.

Coach Training will be held March 26, 2022, at Amherst High School.

At least one Manager/Coach from each team must attend the training. Every Manager/Coach will attend this training.

Requirement 6.

First Aid Training will be held at a community center within the Town of Amherst. Training will be conducted by the Snyder Fire Department.

At least one Manager/Coach from each team must attend the training. Every Manager/Coach will attend this training at least once every three years.

*Highly recommended: Research the concussion laws in New York State and educate all Managers/Coaches and League Members. Information will be provided to Managers/Coaches at the Coach Training.

Requirement 7.

Director on Duty and Managers/Coaches will be required to **walk/inspect the fields** prior to practices and games. Umpires will also be required to **walk/inspect the fields** prior to each game.

Requirement 8.

Central Amherst Little League has completed and updated our **2022 Facility Survey** online.

Requirement 9.

Snack Stand Safety

A. The Snack Stand menu shall be posted and approved by the Safety Officer and League President.
B. Our Snack Stand Safety Procedures will posted in several location throughout the stand.
C. Our Snack Stand Safety Procedures are included in this document as Appendix J.

Requirement 10.

The **League Safety Officer** and **Equipment Manager** will inspect all equipment prior to the start of the season.
–Managers/Coaches will inspect equipment prior to each game.
–Umpires will be required to inspect equipment prior to each game.

Requirement 11.

Implement Prompt Accident Reporting.

Central Amherst Little League will use the provided Incident Tracking form from the Little League website and will provide completed Accident Reporting forms to the Safety Officer within 24-48 hours of the incident. Please see copy of Incident/Injury Tracking form in Appendix O.

Requirement 12.

Each team will be issued an updated **First Aid Kit** and it is a requirement to have it at every practice and game. Additional first aid supplies are available in the Snack Stand.

Requirement 13.

Central Amherst Little League will require ALL TEAMS to enforce **ALL Little League Rules**, including Proper equipment

for catchers.

A. No on-deck batters.

B. Coaches will not warm up pitchers.

C. Bases will disengage on all fields.

Requirement 14.

Qualified Safety Plan Registration form.

The Safety Plan **will not** be shown as received without this form.

Requirement 15.

League Player Registration Data or Player Roster Data and Coach and Manager Data.

League Player Registration Data or Player Roster Data and Coach and Manager Data will be submitted via the Little League Data Center at www.LittleLeague.org.

This is a mandatory requirement for an approved ASAP plan.

Appendix A: Basic Safety Code Outline

SAFETY CODE DEDICATED TO INJURY PREVENTION DURING THE SEASON

1. Responsibility for safety procedures should be that of an adult member of Central Amherst Little League.
2. Managers, coaches, and umpires should have training in first-aid. First-aid kits are issued to each coach and are also located at the Snack Stand.
3. No games or practices should be held when weather or field conditions are not good, particularly when lighting is a potential.
4. Play area should be inspected frequently for holes, damage, stones, glass, and other foreign objects.
5. All team equipment should be stored within the team dugout, or behind screens, and not within the area defined by the umpires as "in play."
6. Only players, managers, coaches, and umpires are permitted on the playing field or in the dugout during games and practice sessions.
7. Responsibility for keeping bats and loose equipment off the field of play should be that of a player assigned for this purpose and coaches.
8. Procedure should be established for retrieving foul balls batted out of playing area.
9. During practice and games, all players should be alert and watching the batter on each pitch.
10. During warm-up drills, players should be spaced so that no one is endangered by wild throws or missed catches.
11. All pre-game warm-ups (e.g., playing catch, pepper, swinging bats, etc.) should be performed within the confines of the playing field and not within areas that are frequented by, and thus endanger, spectators.
12. Equipment should be inspected regularly for the condition of the equipment as well as for proper fit.
13. Batters must wear Little League-approved protective helmets during batting practice and games.
14. Catcher must wear catcher's helmet, mask, long model chest protector, shin guards, protective cup with athletic supporter (male players) for all practices and games.
15. Managers should encourage all male players to wear protective cups and supporters for practices and games.
16. Except when runner is returning to a base, headfirst slides are not permitted.
17. During sliding practice, bases should not be strapped down or anchored.
18. At no time should "horse play" be permitted on the playing field.
19. Parents of players who wear glasses should be encouraged to provide "safety glasses."
20. Players must not wear necklaces, watches, rings, pins, or metallic items during games and practices.
21. The catcher must wear catcher's helmet and mask in warming up pitchers. This applies between innings and in the bullpen during a game and also during practices.
22. On-deck batters are not permitted on the field of play.

Appendix B: Coaching Do's and Don'ts

DO

-Reassure and aid children who are injured, frightened, or lost;
-Provide, or assist in obtaining, medical attention for those who require it.
-Know your limitations;
-Carry your first-aid kit to all games and practices;
-Assist those who require medical attention and, when administering aid, remember to:

LOOK for signs of injury (blood, black-and-blue deformity of joint etc.).

LISTEN to the injured describe what happened and what hurts if conscious. (Before questioning, you may have to calm and soothe an excited child.)

FEEL gently and carefully the injured area for signs of swelling or grating of broken bone.

-Have your players' Medical Clearance Forms with you at all games and practices.
-Make arrangements to have a cellular phone available when your game or practice is at a facility that does not have any public phones.

DON'T

-Administer any medications.
-Provide any food or beverages (other than water).
-Hesitate in giving aid when needed.
-Be afraid to ask for help if you're unsure of the proper procedures.
-Transport injured individuals to a medical facility except in extreme emergencies—call 911.
-Leave an unattended child at a practice or game.
-Hesitate to report any present or potential safety hazard to the Safety Officer immediately.

Appendix C: Coaches Code of Ethics

I hereby pledge to live up to my duties as a coach by following this Coaches Code of Ethics:

1. I will place the emotional and physical well being of my players ahead of any personal desire to win.
2. I will remember to treat each player as an individual, remembering the large spread of emotional and physical development for the same age group.
3. I will do my very best to provide a safe play situation for all my players.
4. I will do my best to organize practices that are fun and challenging for all players.
5. I will insure that I am knowledgeable in the rules of each sport that I coach, and that I will teach these rules to my players.
6. I will use these coaching techniques appropriate for each of the skills I will teach.
7. I will remember that I am a *youth* coach and that the game is for children and not adults.

Some Gentle Reminders

- Central Amherst Little League goes through great lengths to provide as much training and instructions to our coaches as possible. Attend as many of the clinics as possible.
- Check your e-mail and your team's mailbox at the Equipment Shed regularly for league updates, memorandums, and special notices.

Appendix D: Central Amherst Little League Code of Conduct

- Speed limit 5 mph in roadways and parking lots while attending any Central Amherst Little League function. Watch for small children around parked cars.
- No alcohol/tobacco allowed in any parking lot, field, or common areas within the Central Amherst Little League complex.
- No playing in parking lots at any time.
- No playing on and around lawn equipment.
- No profanity please.
- No swinging bats or throwing baseballs at any time within the walkways and common areas of the Central Amherst Little League complex.
- No throwing balls against dugouts or against backstop. Catchers must be used for all batting practice sessions.
- No throwing rocks.
- No horse play in walkways at any time.
- No climbing fences.
- No non-service animals/pets are permitted at the Central Amherst Little League games or practices.
- Only a player on the field and at bat, may swing a bat.
- Observe all posted signs. Players and spectators should be alert at all times for foul balls and errant throws.
- During games, players must remain in the dugout area in an orderly fashion at all times.
- After each game, each team must clean up trash in dugout and around stands.
- No children under the age of 16 are to be permitted in the Snack Stand.

Failure to comply with the above may result in expulsion from the Central Amherst Little League fields and complex.

Appendix E: Accident Reporting Procedures

WHAT TO REPORT

An incident that causes any player, manager, coach, umpire, or volunteer to receive medical treatment and/or first aid must be reported to the Director of Safety. This includes even passive treatments such as the evaluation and diagnosis of the extent of the injury or periods of rest.

WHEN TO REPORT

All such incidents described above must have an INCIDENT/INJURY TRACKING REPORT (attached to the Safety Manual). These will be on a clipboard in the Snack Stand and in the Storage shed. This report then must be provided to the Director on Duty that day. Also, the Director of Safety must be notified within 48 hours of the incident.

Nate Shaw, Safety Officer
(716) 359-3601

HOW TO MAKE THE REPORT

At the time of the incident the Incident/Injury Tracking report should be filled out or, barring the immediate availability of the form, at a minimum, the following information must be provided:

-The name and phone number of the individual involved
-The date, time, and location of the incident
-As detailed a description of the incident as possible
-The preliminary estimation of the extent of any injuries
-The name and phone number of the person reporting the incident.

SAFETY OFFICER'S RESPONSIBILITIES

Within 48 hours of receiving the incident report, the Safety Officer will contact the injured party or the party's parents and (1) verify the information received; (2) obtain any other information deemed necessary; (3) check on the status of the injured party; and (4) in the event that the injured party required other medical treatment (i.e., Emergency Room visit, doctor's visit, etc.) will advise the parent or guardian of the Central Amherst Little League's insurance coverages and the provisions for submitting any claims.

If the extent of the injuries are more than minor in nature, the Safety Officer shall periodically call the injured party to (1) check on the status of any injuries, and (2) to check if any other assistance is necessary in areas such as submission of insurance forms, etc. until such time as the incident is considered "closed" (i.e., no further claims are expected and/or the individual is participating in the league again).

Appendix F: Coaching Expectations

WHAT DO I EXPECT FROM MY PLAYERS?

- to be on time for all practices and games.
- to always do their best whether in the field or on the bench.
- to be cooperative at all times and share team duties.
- to respect not only others, but themselves as well.
- to be positive with teammates at all times.
- to try not to become upset at their own mistakes or those of others ... we will all make our share this year and we must support one another.
- to understand that winning is only important if you can accept losing, as both are important parts of any sport.

WHAT CAN YOU AND YOUR CHILD EXPECT FROM ME?

- to be on time for all practices and games.
- to be as fair as possible in giving playing time to all players.
- to do my best to teach the fundamentals of the game.
- to be positive and respect each child as an individual.
- to set reasonable expectations for each child and for the season.
- to teach the players the value of winning and losing.
- to be open to ideas, suggestions or help.
- to never holler at any member of my team, the opposing team or umpires. Any confrontation will be handled in a respectful, quiet and individual manner.

WHAT DO I EXPECT FROM YOU AS PARENTS AND FAMILY?

- to come out and enjoy the game. Cheer to make all players feel important.
- to allow me to coach and run the team.
- to try not to question my leadership. All players will make mistakes and so will I.
- do not holler at me, the players or the umpires. We are all responsible for setting examples for our children. We must be the role models in society today. If we eliminate negative comments, the children will have an opportunity to play without any unnecessary pressures and will learn the value of sportsmanship.
- if you wish to question my strategies or leadership, please do not do so in front of the players or fans. My phone number will be available for you to call at any time if you have a concern.

Appendix G: Equipment Shed Procedures

The following applies to all storage sheds used by Central Amherst Little League and apply to anyone who has been issued a key by Central Amherst Little League to use those sheds.

- All individuals with keys to the Central Amherst Little League equipment sheds (i.e., Coaches, Managers, Umpires, etc.) are aware of their responsibilities for the orderly and safe storage of rakes, shovels, bases, etc.
- Before you use any machinery located in the shed (i.e., lawn mowers, weed whackers, lights, scoreboards, public address systems, etc.) please locate and read the written operating procedures for that equipment.
- All chemicals or organic materials stored in Central Amherst Little League sheds shall be properly marked and labeled as to its contents.
- All chemicals or organic materials (i.e., lime, fertilizer, etc.) stored within these equipment sheds will be separated from the areas used to store machinery and gardening equipment (i.e., rakes, shovels, etc.) to minimize the risk of puncturing storage containers.
- Any witnessed “loose” chemicals or organic materials within these sheds should be cleaned up and disposed of as soon possible to prevent accidental poisoning.

Appendix H: Batting Cage Rules

Teams will be allowed one Prime Time hour per week.

Prime Times are from 5:00 to 8:00 pm Monday thru Friday and 9:00 am to 5:00 pm on Saturdays.

The equipment shed should be open during these times. A sign-up sheet will be in the shed.

There are some rules to be followed when using the pitching machine.

- Only Coaches and Assistants can operate the pitching machine.
  NO EXCEPTIONS!

- Keep all children away from the machine and only one person in the cage at a time wearing a helmet.

- Use only the balls marked “batting cage.”

Appendix I: Lightning Facts and Safety Procedures

WHEN YOU HEAR IT - CLEAR IT WHEN YOU SEE IT - FLEE IT

Consider the following facts:

- The average lightning stroke is 6 - 8 miles long.
- The average thunderstorm is 6 -10 miles wide and travels at a rate of 25 miles per hour.
- Once the leading edge of a thunderstorm approaches to within 10 miles, you are at immediate risk due to the possibility of lightning strokes coming from the storm's overhanging anvil cloud.
- On the average, thunder can only be heard over a distance of 3 - 4 miles, depending on humidity, terrain, and other factors. This means that by the time you hear the thunder, you are already in the risk area for lightning strikes.

Rule of Thumb

The ultimate truth about lightning is that it is unpredictable and cannot be prevented. Therefore, a manager, coach, or umpire who feels threatened by an approaching storm should stop play and get the kids to safety.

When in doubt, the following rule of thumb should be applied:

Where to Go?

No place is absolutely safe from the lightning threat, but some places are safer than others. Large enclosed shelters (substantially constructed buildings) are the safest.. For the majority of participants, the best area for them to seek shelter is in a fully enclosed metal vehicle with the windows rolled up. If you are stranded in an open area and cannot get to shelter in a car, put your feet together, crouch down, and put your hands over your ears (to try and prevent eardrum damage).

Where NOT to Go!!

Avoid high places and open fields, isolated trees, unprotected gazebos, rain or picnic shelters, dugouts, flagpoles, light poles, bleachers (metal or wood), metal fences, and water.

"Flash-Bang" Method

One way of determining how close a recent lightning strike is to you is called the "flash-bang" method. With the "flash- bang"method, a person counts the number of seconds between the sight of a lightning strike and the sound of thunder that follows it.

Halt-play and evacuation should be called for when the count between the lightning flash and the sound of its thunder is 15 seconds or less.

First Aid to a Lightning Victim

Typically, the lightning victim exhibits similar symptoms as that of someone suffering from a heart attack. In addition to calling 911, the rescuer should consider the following:

- The first tenet of emergency care is "make no more casualties". If the victim is in a high risk area (open field, isolated tree, etc.) the rescuer should

determine if movement from that area is necessary - lightning can and does strike the same place twice. If the rescuer is at risk, and movement of the victim is a viable option, it should be done.

- If the victim is not breathing, start mouth to mouth resuscitation. If it is decided to move the victim, give a few quick breaths prior to moving them.
- Determine if the victim has a pulse. If no pulse is detected, start cardiac compressions as well.

Note: CPR should only be administered by a person knowledgeable and trained in the technique.

Appendix J: Snack Stand Safety Procedures

The following information is intended to help you run a healthful snack stand. Following these simple guide-lines will help minimize the risk of food borne illness.

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 the 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 41º F or below (if cold) or 140º F or above (if hot). Ground beef products should be cooked to an internal temperature of 155º F, Most food borne illnesses from temporary events can be traced back to lapses in temperature control.

3. Cooling and Cold Storage. Foods that require refrigeration must be cooled to 41º 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 food borne illness.

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

5. Health and Hygiene. Only healthy workers should prepare and serve food. Anyone who shows symptoms of disease (cramps, nausea, fever, vomiting, diarrhea, 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.

6. 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.

7. 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
4. Air drying.

8. 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 food-borne illness.

9. 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.

10. 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.

Appendix K: Hand Washing Procedure

- Volunteers Must Wash Hands
- How:
    1. Wet with warm water.
    2. Wash for 20 seconds and use soap.
    3. Rinse.
    4. Dry using single-service paper towels.
    5. Gloves.

- 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.

- Wear gloves, especially when you have a cut or sore on your hand

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

Appendix L: The Heimlich Maneuver

The Heimlich Maneuver is an emergency method of removing food or foreign objects from the airway to prevent suffocation. When approaching a choking person, one who is still conscious, ask: “Can you cough? Can you speak?”

If the person can speak or cough, do not perform the Heimlich Maneuver or pat them on the back. Encourage them to cough.

To perform the Heimlich on an adult:

- Grasp the choking person from behind;
- Place a fist, thumb side in, just below the person’s breastbone (sternum), but above the naval;
- Wrap second hand firmly over this fist;
- Pull the fist firmly and abruptly into the top of the stomach.

It is important to keep the fist below the chest bones and above the naval (belly button). The procedure should be repeated until the airway is free from obstruction or until the person who is choking loses consciousness (goes limp).

These will be violent thrusts, as many times as it takes.

To perform the Heimlich on a child:

- Place your hands at the top of the pelvis;
- Put the thumb of your hand at the pelvis line;
- Put the other hand on top of the first hand;
- Pull forcefully back as many times as needed to get object out or the child becomes limp.

Most individuals are fine after the object is removed from the airway.

However, occasionally the object will go into one of the lungs. If there is a possibility that the foreign object was not expelled, medical care should be sought.

If the object cannot be removed completely by performing the Heimlich, immediate medical care should be sought by calling 911 or going to the local emergency room.

Appendix M: AED Procedures

AED is Available at the Snack Stand

What is an AED?

The automated external defibrillator (AED) is a computerized medical device. An AED can check a person's heart rhythm. It can recognize a rhythm that requires a shock. And it can advise the rescuer when a shock is needed. The AED uses voice prompts, lights and text messages to tell the rescuer the steps to take.

AEDs are very accurate and easy to use. With a few hours of training, anyone can learn to operate an AED safely. There are many different brands of AEDs, but the same basic steps apply to all of them. The AHA does not recommend a specific model.

Location of the AED

The AED is located inside the Equipment Shed. At least one member of the Central Amherst community, trained in the use of the AED will be on hand for all games. We believe this increases the safety level for both our players, and their family members.

In Case of a Cardiac Emergency

If you witness any individual having a cardiac event, your first call is to 911. We are also looking into the best method for an individual, no matter your location on the Central Amherst facility, to signal need for emergency assistance. Once the Director on Duty is aware of an issue, he or she will quickly get to the AED, and take it to the person in need of assistance.

Appendix N: Incident/Injury Tracking Form

For Local League Use Only

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)

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 being allowed in a game or practice.)

Type of incident and location:

A.) On Primary Playing Field
- ☐ Base Path: ☐ Running *or* ☐ Sliding
- ☐ Hit by Ball: ☐ Pitched *or* ☐ Thrown *or* ☐ Batted
- ☐ Collision with: ☐ Player *or* ☐ Structure
- ☐ Grounds Defect
- ☐ Other: _____

B.) Adjacent to Playing Field
- ☐ Seating Area
- ☐ Parking Area

C.) Concession Area
- ☐ Volunteer Worker
- ☐ Customer/Bystander

D.) Off Ball Field
- ☐ Travel:
- ☐ Car *or* ☐ Bike *or*
- ☐ Walking
- ☐ League Activity
- ☐ 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: _____