Harvard Little League
Safety Plan

2015

Risa Goldman
Safety Officer

and

Stephen Mirarchi
President
IMPORTANCE OF SAFETY

The purpose of this document is to emphasize the importance of safety in the Harvard Little League and to identify important safety issues of which all individuals involved should be aware.

League administrators, coaches, parents and players should take safety issues very seriously.

In 1995, Little League Baseball introduced A Safety Awareness Program (ASAP) with the goal of re-emphasizing the position of a Safety Officer to “create awareness, through education and information, of the opportunities to provide a safer environment for kids and all participants of Little League Baseball”. This program has been very successful by dramatically decreasing little league baseball related injuries. This safety plan is qualified by the ASAP program.

The safety plan herein refers to play at the Ryan Land Park Little League Baseball fields located on Depot Road near the town garage and transfer station in Harvard, Massachusetts. Further information beyond this document regarding safety and the ASAP program is available by contacting the Harvard Little League Safety Officer listed below.

There are several points addressed in this document that are required for an approved ASAP compliant Safety Plan. The following is a list of the important features, policies, and requirements of the Safety Plan:

1. **Safety Officer:**

   The Harvard Little League program has an active Safety Officer on file with Little League Headquarters. This Safety Officer for the 2015 season is:

   **Risa Goldman**
   10 Glenview Drive
   Harvard, MA 01451
   978-772-9687 (h)
   978-502-2903 (c)

   Any questions regarding this plan and Harvard Little League safety can be directed to the Safety Officer or the League President.

2. **Safety Plan:**

   This document has been developed by Harvard Little League to provide an overview of the procedures, policies, and activities that have been instituted by the League to provide a safe and healthy environment for those participating in our Little League Baseball program. As part of maintaining awareness of the importance of safety, this document will be printed and distributed to all league officials and volunteers active during the season. It will also be posted on the Harvard Youth Baseball & Softball Association website for reference by all
volunteers, players, and parents participating in Harvard Little League. A copy will also be available in the Equipment Shed and the Snack Shack at Ryan Land Field on Depot Road. This plan will also be submitted to the District Administrator.

3. **Emergency Information:**

The emergency contact information sheet which also contains contact information for league officers and coordinators will be included as part of the Safety Plan that is distributed to volunteers as outlined above. Also provided with the contact information are Emergency Contact Procedures to assist in the event of an emergency situation.

This emergency information will be posted at the Snack Shack and Equipment Shed located at the Ryan Land field for reference.

4. **Background Checks for Volunteers:**

Managers, coaches, board members and any others, volunteers or hired workers, who provide regular services to Harvard Little League and/or have repetitive access to or contact with players or teams are required to fill out a 2015 Little League Volunteer Application form including a photocopy of a government-issued photo identification card for ID verification. Based on the volunteer application, Harvard Little League will conduct a nationwide background check including available sex offender registries.

In addition, for compliance with the laws of the Commonwealth of Massachusetts, volunteers will also be required to complete a CORI Request Form. Upon completion, the forms referenced above will be submitted to either the League President, Safety Officer, or directly to the league’s attorney who will be conducting all background checks to maintain privacy and confidentiality. Contact information for the league’s attorney:

Patrick Bunnell  
6 Grove Ave  
Leominster, MA  
978-840-0001

Anyone refusing to fill out the Volunteer Application is automatically ineligible to be a league volunteer or member in any capacity. A copy of these forms and instructions are included within the appendix.

5. **Fundamentals Training:**

It is the intent of Harvard Little League that all managers, coaches, and assistant coaches attend and participate in at least one fundamental coaches training session. The minimum requirement is for at least one member of the coaching staff for each team to attend one of the training sessions being offered. We will be offering this formal training as part of a regional clinic:
Coaching Fundamentals Training:

District training session:
Big Al Clinic
South High School Gymnasium
170 Apricot St.
Worcester, MA 01603
April 12, 2015
8:30 AM - 12:30 PM for coaches of players 9-13 yrs.
1:00 PM - 4:30 PM for coaches of and parents of players 5-8 yrs.

Coach the Coaches Program
Harvard Youth Baseball ensures proper skill development of participants by providing an innovative Coach the Coaches program. This is accomplished by ensuring all volunteer Little League coaches receive instruction from qualified baseball instructors sourced from local baseball training facilities and area high schools. These professional coaches assist Harvard Youth Baseball volunteer coaches by attending the team practices, helping the coaches with practice plans and executing the drills properly. This program’s objectives are to ensure high quality instruction from Tee-Ball through Majors divisions by delivering consistent methods of teaching critical skills as well as ensuring a fun, rewarding experience for youth players.

6. First Aid Training:
Harvard Little League’s intent is for all managers, coaches, and assistant coaches to attend a first aid training session prior to the start of the spring season. The minimum requirement is for every manager or coach to attend a First Aid Training session once every three years with at least one team representative in attendance every year. To accomplish this goal, we will be offering First Aid Training in two ways for the 2015 Season:

District training session:

February 7, 2015 9:00 AM to 12:00 PM
Worcester Polytechnic Institute, Kavin Hall Rm.
100 Institute Rd.
Worcester, MA

Local training session:

April 4, 2015 Time TBA
Congregational Church of Harvard
Harvard, MA 01451

Volunteers will be notified when the details of the local training session are final. Please contact Risa Goldman with questions.
7. **Field Inspections:**

The Town of Harvard Parks & Recreation Department inspects the fields every year at the beginning of the season for exposed fence wires, dugout conditions, benches, etc. The fields and surrounding areas are also reviewed on a regular basis during the season by the Safety Officer and/or other Board Members. In addition, Harvard team coaches and umpires will be required to review the field on which they will be playing before each game to look for and correct any unsafe conditions (holes, broken glass, rocks, equipment, etc.) prior to the start of play. Please refer to checklist in the appendix section of this document.

Any field or areas used for league practices shall be inspected for unsafe conditions by team coaches prior to all league practices as well.

8. **Facility Survey:**

Harvard Little League conducts a formal Facility Survey that is updated on an annual basis and submitted to the Little League Headquarters along with this Safety Plan. You may contact the league Safety Officer or other league officials for a copy or access if necessary.

9. **Concession Stand Procedures:**

Harvard Little League operates a small concession stand adjacent to Field #1 at the Ryan Land Fields. This concession stand (referred to as the “Snack Shack”) consists primarily of pre-packaged food, drinks, and snacks. There is also a small outdoor grill that is used for preparation of hot dogs and pre-cooked chicken. We do not prepare uncooked meats at our concession stand.

Volunteers who operate the concession stand will be provided with instructions by the Snack Shack Coordinators and given copies of the Harvard Little League Concession Policy. This policy is included within the appendix of the Safety Plan for reference.

10. **Equipment Inspection:**

Regular inspection of equipment is necessary to ensure safety. Replacement of defective equipment must be done immediately by contacting the Equipment Manager or any league official. Equipment checks are done formally by three sources:

1) By the equipment manager at the beginning of the season and periodically throughout the year;

2) By coaches at the beginning of each game and

3) Umpires during the course of games.

11. **Accident Reporting and Tracking:**

An incident that causes any player, manager, coach, umpire, or volunteer to receive medical treatment and/or first aid must be reported to the league.
**Safety Officer within 48 hours of incident.** This includes even passive treatments such as the evaluation and diagnosis of the extent of the injury or periods of rest. The league Safety Officer will log all reported incidents and track as noted below.

**How to Make a Report:**

The League will provide hardcopy printouts of the Incident / Injury Tracking Report (included in the appendix) with all First Aid kits that are provided to every Team as part of the standard issue equipment. This will allow teams to have the form with them when traveling to other towns. In addition, copies of this form will be kept in the concession stand and equipment shed at the Ryan Land Fields.

A coach or league official must complete an incident/injury tracking report as soon as possible after the incident occurs and notify the league Safety Officer via telephone or email of the incident. The coach or official may either deliver the form to the Safety Officer or leave the form in the Equipment Shed in a location designated in advance by the Safety Officer so that he can receive this information in a timely manner.

Within 2 days following the incident, 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 Harvard Little League’s insurance coverages and the provisions for submitting any claims.

If the extent of the injuries is 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. Determine if any other assistance is necessary in areas such as submission of insurance forms, etc.

The Safety Officer will continue this process 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). An Accident Notification Form will be generated and sent to Little League Headquarters in Williamsport (Attention: Dan Kirby, Risk Management Department) and reported to the District Safety Officer when required.

All incidents, accidents, and safety violations should be reported to the Safety Officer within 48 hours of the incident. Timely reporting of safety violations is a key factor in promptly dealing with safety issues including preventative measures or corrections that may protect a child from harm in the future.
12. **First Aid Kits:**

A First-Aid Kit is required to be on hand for every game and practice. Harvard Little League supplies each team a First-Aid Kit with the team’s equipment bag. In addition, First-Aid Kits and first aid supplies are located in the concession stand and in the equipment shed for use as needed. If supplies are depleted during the season, contact the Safety Officer or a league official for replacements.

13. **Little League Rules:**

Harvard Little League Managers, Coaches, Umpires, and League Officials are required to enforce Little League rules at all games and practices, including proper equipment. Most Little League rules have some basis in safety, so it is important to follow them. Below is a list of both Harvard league rules and key Little League rules pertaining to safety:

**FIELD AND DUGOUT SAFETY**

It is important to remember that we want to make baseball a safe and enjoyable experience for all the players. A bulleted list of several of the league policies and key Little League baseball rules regarding field and dugout safety follows.

- A phone list for emergency numbers, non-emergency numbers, and league contact information is posted at the Ryan Land Field concession stand and inside the equipment shed. The town of Harvard also has 911 services for emergencies. It is good practice to identify those coaches and parents who have cell phones available for all games and practices.

- An emergency call-box is located on the side of the Highway Department Garage across the soccer field adjacent to Ryan Land Fields in case other options are not immediately available.

- A first-aid kit and first aid supplies are located in the concession stand and equipment shed at Ryan Land Field. In addition each team is issued a first-aid kit with the team’s equipment bag. If supplies are depleted during the season, contact the Safety Officer or league officials for replacements.

- No games or practices should be held under severe weather conditions (especially lightning) or when field conditions are unsafe. It is important for coaches and officials to be diligent with regard to playing conditions. Always err on the side of caution.

- Follow league policy regarding Lightning Safety.

- The fields and surrounding areas must be inspected on a regular basis. The field will be reviewed before each game by the umpire and team coaches to look for and to correct any unsafe conditions (holes, broken glass, rocks). Any field or areas used for league practices shall be inspected for unsafe conditions by team coaches prior to all league practices.
• A Little League Facility Survey is updated annually, submitted to Little League headquarters and kept on file. Contact the Safety Officer or a league official for a copy or access if necessary.

• Only players, managers, coaches and umpires are permitted on the playing field during play and practice sessions.

• All bats and loose equipment must be kept off the playing fields. Bat racks should be placed behind screens. Organized equipment can prevent tripping hazards.

• Coaches should establish a procedure for retrieval of fouls balls batted out of play. During practice sessions and games, all players should be alert and watching the batter on each pitch.

• Coaching staffs, Safety Officer and umpires are responsible for the regular inspection of equipment. This includes both league equipment and equipment brought by the player. Non-safe equipment must be removed immediately and replaced as soon as needed. Make sure the equipment is properly fitted to the players.

• Ensure players have required equipment at all times, even catchers warming up pitchers.

• All fields are to use bases that disengage from their anchors, as required by Little League.

• Pitching Machines will be maintained in good working order and must be operated only by adult Managers and Coaches.

• “Horseplay” should not be permitted on the playing fields.

**PLAYER SAFETY**

Harvard Little League and Little League key rules pertaining to player safety are outlined below:

• Coaches should inspect equipment on a regular basis, making sure it fits correctly and is in proper working order. Broken or improper equipment can be replaced by contacting the Equipment Manager or league officials. Batting and catching helmets are not permitted when they have been painted by anyone other than the manufacturer.

• Batters must wear protective helmets during practices and games.

• Catchers must wear a catcher’s helmet with face mask and throat guard, chest protector and shin guards.

• Male catchers must wear a long-model chest protector, protective supporter and cup at all times.

• Warm-up catchers must wear catcher’s helmet, facemask, and throat guard while warming up pitchers (skull caps are not permitted). This applies between innings, during bull-pen warm-ups and pre-game infield
drills. Adults may NOT warm up a pitcher. This is a safety issue for both the player and the adult.

- Rule 7.08a (sections 3, and 4) is particularly important for safety and will be vigorously enforced. A runner must slide OR avoid a fielder who has the ball and is waiting to make the tag. Except when returning to base, no head-first slides are permitted. If any coach or parent is unsure of the proper interpretation of rule 7.08a please see the Safety Officer or other league officials.

- Coaches shall instruct all players in safe sliding techniques as well as how to avoid a pitched ball.

- Players must not wear watches, rings, pins, jewelry or other metallic items by Little League baseball rule.

- Parents of players that wear glasses should be encouraged to provide “safety glasses”.

- No on-deck batters are allowed. No player should handle a bat even while in an enclosure, until it is his/her turn at bat.

- Players who are ejected, ill or injured should remain under coach supervision until released to the parent or guardian.

- After a game or practice, coaches should not leave the area until all players have been picked up.

- Players will be instructed in proper stretching and general sports health maintenance procedures, including proper throwing, fielding and hitting techniques to limit injury.

- Injuries should be reported immediately per Harvard Little League’s “Accident Reporting & Tracking” procedures as outlined in the Safety Plan.

**Adult Training & Safety**

- All coaches are required to attend a Fundamental Training Clinic at dates/locations specified earlier in this document. It is required that each manager and coach shall attend at least once every three years with at least one team representative of each team attending every year.

- Periodically, the Harvard Little League will hold additional coaches training clinics during the season. Contact league officials for more information.

- All umpires are expected to participate in pre-season rules and umpire clinics at the local and/or district level.

- All coaches and umpires should be familiar with Little League and HLBB (Harvard, Lancaster, Bolton, Berlin) league safety, playing rules and procedures. These are distributed to all managers, coaches and umpires
at the beginning of the season and are readily available thru league officials or via the concession and equipment sheds at the Ryan Land Fields as well as online at the league’s website.

- The Harvard Little League shall have a Safety Plan in effect that includes safety policies for its league Concession Stand. This plan will be reviewed and updated annually. A copy is included in the appendix.

14. 2015 Qualified Safety Program Registration
Harvard Youth Baseball has completes a 2015 Qualified Safety Program Registration Form. A copy of this form is located in the Appendix – Section M.

15. League Registration Data Reporting

Each year, Little League Baseball requests player roster, coach and manager listings be submitted to the Little League Data Center. Harvard Youth Baseball and Softball Association has submitted to Little League Data Center, all player, coach and manager listings available as of January 30, 2015. This information will be updated upon completion of registrations for the 2015 season. In 2015, registration is completed on-line through the League website between the following dates.

- Registration Start: December 1, 2014
- Registration End: March 31, 2015
APPENDIX

A. Emergency / League Contact Information
B. Emergency Contact Procedures
C. Hey Coach! – Game Day Flyer
D. Lightning Safety Policy and Brochure
E. Concession Stand Policy
F. Adult ‘Game Coordinator’ Policy
G. Pitching Machines Policies and Procedures
H. Aerial View of Fields
I. Injury Tracking Form
J. Accident Notification Form
K. Background Checks:
   1) Volunteer Instructions
   2) CORI Form
   3) Little League Volunteer Application Form
L. Facility Survey Confirmation Form
M. 2015 Qualified Safety Program Registration
A. Harvard Little League Emergency Phone Numbers:

In case of emergency
Dial 911

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<tr>
<th>Service</th>
<th>Type</th>
<th>Number</th>
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<tr>
<td>Police – Fire – Ambulance</td>
<td>Emergency</td>
<td>911</td>
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<tr>
<td>Poison Center</td>
<td>Emergency</td>
<td>800-222-1222</td>
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<tr>
<td>Harvard Police</td>
<td>Non-emergency</td>
<td>978-456-1212</td>
</tr>
<tr>
<td>Harvard Fire Department</td>
<td>Non-emergency</td>
<td>978-456-3648</td>
</tr>
<tr>
<td>Board of Health</td>
<td>Non-emergency</td>
<td>978-456-4106</td>
</tr>
<tr>
<td>Dept. of Public Works</td>
<td>Non-emergency</td>
<td>978-456-3043</td>
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2015 Harvard Little League Contacts:

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<tr>
<th>Role</th>
<th>Name</th>
<th>Phone Number</th>
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<tbody>
<tr>
<td>President</td>
<td>Stephen Mirarchi</td>
<td>508-873-7991</td>
</tr>
<tr>
<td>Vice President</td>
<td>Andrea Pelak</td>
<td>978-772-0789</td>
</tr>
<tr>
<td>Treasurer</td>
<td>Kristine O’Neil</td>
<td>617-331-4830</td>
</tr>
<tr>
<td>Player Agent</td>
<td>Chris Glew</td>
<td>857-350-5932</td>
</tr>
<tr>
<td>Secretary</td>
<td>Patrick Bunnell</td>
<td>978-833-8731</td>
</tr>
<tr>
<td>Safety Officer</td>
<td>Risa Goldman</td>
<td>978-772-9687</td>
</tr>
<tr>
<td>Softball Coordinator</td>
<td>Pat Nelson</td>
<td>978-456-8239</td>
</tr>
<tr>
<td>Majors Coordinators</td>
<td>Jonathan Gothorpe</td>
<td>978-503-9967</td>
</tr>
<tr>
<td>Minors Coordinator</td>
<td>Mike Myles</td>
<td>978-870-5298</td>
</tr>
<tr>
<td>Rookies Coordinator</td>
<td>Larry Feinberg</td>
<td>413-627-8149</td>
</tr>
<tr>
<td>Tee Ball Coordinator</td>
<td>Kevin Bassage</td>
<td>978-456-0001</td>
</tr>
<tr>
<td>District Administrator</td>
<td>Linda McGill</td>
<td>508-852-1201</td>
</tr>
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B. EMERGENCY CONTACT PROCEDURES

The most important help you can provide to a person who is seriously injured is to call for professional medical help. Make the call quickly, preferably from a cell phone near the injured person. If this is not possible, send someone else to make the call from a nearby telephone.

An emergency call-box is located on the side of the Highway Department Garage across the soccer field adjacent to the Ryan Land fields in case other options are not immediately available.

Be sure that you or another caller follows these steps:

1) First dial 9-1-1.

2) Give the dispatcher the necessary information. Answer any questions that they might ask. Most dispatchers will ask:

   • The exact location or address of the emergency? Include the town name, nearby intersections, landmarks, etc. as well as the field name and location of the person(s) needing care, if applicable.
     
     Our address is: Ryan Land Fields, Depot Road Field (between the intersections of Mill and Craggs Roads)

   • The telephone number from which the call is being made?

   • The caller’s name?

   • What happened — i.e., a baseball-related accident, bicycle accident, fire, fall, etc.?

   • How many people are involved?

   • The condition of the injured person— i.e., unconscious, chest pains, or severe bleeding?

   • What help is being given (first aid, CPR, etc.)?

3) Do not hang up until the dispatcher hangs up. The dispatcher may be able to tell you how to best care for the victim.

4) Continue to care for the victim until professional help arrives.

5) Appoint someone to go to the street and look for the ambulance or fire engine and flag them down if necessary. This saves valuable time. Remember, every minute counts.
**HEY COACH**

**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
D. Lightning Safety and Procedures

Harvard Youth Baseball and Softball Association follow Little League policy regarding lightning safety with the following guidelines:

1. Watch for developing or approaching storms; use all resources (web, TV, radio, etc.) to determine the risk level.

2. At the first sound of thunder or visible lightning - CLEAR THE FIELD!
   A thunderstorm can cast lightning up to 10 miles from the edge of the storm, or about as far as the sound thunder can carry.

   WHAT TO DO:
   • Go to a large enclosed building, if one is nearby
   • Go to metal-top cars, with windows rolled up, if no enclosed building is available
   • Complete a check of the facility for anyone still outdoors

   WHAT NOT TO DO:
   • Don’t allow players to remain in the dugouts or spectators to stay in the stands
   • Don’t carry metal items (like bats) or walk beside metal fences
   • Don’t go to an open-sided shelter; it is not adequate and should not be used.

3. Wait at least 30 minutes after the last lightning strike/peal of thunder before returning to play

4. Do not leave facility until directed; wait at designated location(s) at field until the game is postponed or cancelled.

5. Make sure all players are accounted for and leaving with approved person(s)

If someone is struck by lightning:

✓ Lightning victims do not carry an electrical charge, are safe to handle, and need immediate medical attention.

✓ Call for help. Have someone call 9-1-1 or your local ambulance service.

✓ Give first aid. Begin CPR if necessary.

✓ If possible, move the victim to a safer place.

For more information on lightning safety, visit NOAA’s website and refer to attached the NOAA flyer regarding lightning safety.

Parents, coaches, umpires and all volunteers - please help enforce this policy. Our kids’ lives may depend on you!
What to do if someone is struck by lightning

- Lightning victims do not carry an electrical charge, are safe to handle, and need immediate medical attention.

- Call for help. Have someone call 9-1-1 or your local ambulance service. Medical attention is needed as quickly as possible.

- Give first aid. Cardiac arrest is the immediate cause of death in lightning fatalities. However, some deaths can be prevented if the victim receives the proper first aid immediately. Check the victim to see they are breathing and have a pulse and continue to monitor the victim until help arrives. Begin CPR if necessary.

- If possible, move the victim to a safer place. An active thunderstorm is still dangerous. Don’t let the rescuers become victims. Lightning CAN strike the same place twice.

STAY INFORMED

Listen to NOAA Weather Radio for the latest forecast and for any severe thunderstorm WATCHES or WARNINGS. Severe thunderstorms produce winds of 58 mph or greater, or hail 3/4 of an inch or larger in diameter.

A severe thunderstorm WATCH is issued when conditions are favorable for severe weather to develop.

A severe thunderstorm WARNING is issued when severe weather is imminent. National Weather Service personnel use information from weather radar, satellite, lightning detection, spotters, and other sources to issue these warnings.

NOAA WEATHER RADIO IS THE BEST WAY TO RECEIVE FORECASTS AND WARNINGS FROM THE NATIONAL WEATHER SERVICE.

Remember that all thunderstorms produce lightning and all lightning can be deadly to those outside.

Lightning Safety Awareness Week is the last full week of June. For additional information on lightning or lightning safety, visit NOAA’s lightning safety web site:

http://www.lightningsafety.noaa.gov

or contact us at

National Weather Service
P.O. Box 1208
Gray, Maine 04039

GYX 0301 (August 2003) - Revised

Coach’s and Sports Official’s Guide to Lightning Safety...

LIGHTNING... the underrated killer!

A SAFETY GUIDE

U.S. DEPARTMENT OF COMMERCE
NATIONAL OCEANIC AND ATMOSPHERIC ADMINISTRATION

NATIONAL WEATHER SERVICE

Gray, Maine

This safety guide has been prepared to help coaches and sports officials recognize the dangers of lightning and take appropriate safety precautions.
LIGHTNING KILLS
Play It Safe!

Each year in the United States, more than four hundred people are struck by lightning. On average, about 70 people are killed and many others suffer permanent neurological disabilities. Most of these tragedies can be avoided if proper precautions are taken. When thunderstorms threaten, coaches and sports officials must not let the desire to start or complete an athletic activity hinder their judgment when the safety of participants and spectators is in jeopardy.

It is important for coaches and officials to know some basic facts about lightning and its dangers

- All thunderstorms produce lightning and are dangerous. In an average year, lightning kills more people in the U.S. than either tornadoes or hurricanes.
- Lightning often strikes outside the area of heavy rain and may strike as far as 10 miles from any rainfall. Many deaths from lightning occur ahead of storms because people wait too long before seeking shelter, or after storms because people return outside too soon.
- If you hear thunder, you are in danger. Anytime thunder is heard, the thunderstorm is close enough to pose an immediate lightning threat to your location.
- Lightning leaves many victims with permanent disabilities. While only a small percentage of lightning strike victims die, many survivors must learn to live with very serious, life-long disabilities.

To avoid exposing athletes and spectators to the risk of lightning take the following precautions

- Postpone activities if thunderstorms are imminent. Prior to an event, check the latest forecast and, when necessary, postpone activities early to avoid being caught in a dangerous situation. Stormy weather can endanger the lives of participants, staff, and spectators.
- Plan ahead. Have a lightning safety plan. Know where people will go for safety and know how much time it will take for them to get there. Have specific guidelines for suspending the event or activity so that everyone has time to reach safety before the threat becomes significant. Follow the plan without exception.
- Keep an eye on the sky. Pay attention to weather clues that may warn of imminent danger. Look for darkening skies, flashes of lightning, or increasing wind, which may be signs of an approaching thunderstorm.
- Listen for thunder. If you hear thunder, immediately suspend your event and instruct everyone to get to a safe place. Substantial buildings provide the best protection. Once inside, stay off corded phones, and stay away from any wiring or plumbing. Avoid sheds, small or open shelters, dugouts, bleachers, or grandstands. If a sturdy building is not nearby, a hard-topped metal vehicle with the windows closed will offer good protection, but avoid touching any metal.
- Avoid open areas. Stay away from trees, towers, and utility poles. Lightning tends to strike the taller objects.
- Stay away from metal bleachers, backstops and fences. Lightning can travel long distances through metal.
- Do not resume activities until 30 minutes after the last thunder was heard.
- As a further safety measure, officials at outdoor events may want to have a tone-alert NOAA Weather Radio. The radio will allow you to monitor any short-term forecasts for changing weather conditions, and the tone-alert feature can automatically alert you in case a severe thunderstorm watch or warning is issued. To find your nearest NOAA weather radio transmitter, go to http://www.nws.noaa.gov/nwr/ and click on “Station Listing and Coverage.”

If you feel your hair stand on end (indicating lightning is about to strike)

- Crouch down on the balls of your feet, put your hands over your ears, and bend your head down. Make yourself as small a target as possible and minimize your contact with the ground.
- Do not lie flat on the ground.
E. CONCESSION STAND POLICY
HARVARD LITTLE LEAGUE 2015

1. Adult supervision must be in effect at all times.
2. Only adults are allowed to operate or be near the grill.
3. Outdoor grills will be placed in an area away from spectators.
4. All volunteers will wash their hands on a regular basis. (Hand Sanitizer available)
5. Un-wrapped food must be handled with paper towels or plastic wrap.
6. No glass containers of any type will be sold at the concession stand.
7. Everything must be cleaned up and put away at the end of each shift.
8. A complete First-aid Kit will be kept in the concession stand.
9. A fire extinguisher shall be kept in the concession stand for emergency use.
10. A list of emergency phone numbers will be posted in the concession stand.
11. The Nashoba Valley Board of Health Certificate will be posted at all times.
Volunteers Must Wash Hands

**HOW**

- **Wet**
  - warm water

- **Wash**
  - 20 seconds
  - Use soap

- **Rinse**

- **Dry**
  - Use single-service paper towels

- **Gloves**

**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
F. ADULT ‘GAME COORDINATOR’ POLICY

HARVARD LITTLE LEAGUE 2015

If no adult umpire is available for a game, and non-adult umpires are used exclusively for that game, the local Little League must assign an adult as Game Coordinator, or the game cannot be played.

The Game Coordinator must not be a manager or coach of either team in the game, and cannot be assigned as Game Coordinator for more than one game at a time.

The Game Coordinator’s duties shall be:

1. To be included in the pre-game meeting as noted in Rule 4.01.

2. To remain at the game at all times, including between half-innings, in a position to see all actions on the field and in close proximity to the field (not in any enclosure). If, for some reason, the Game Coordinator is not present or is unable to perform his/her duties for any reason, the game must be suspended until the Game Coordinator returns, or until a new adult Game Coordinator is present and assumes the duties of Game Coordinator for the remainder of the game;

3. To oversee the conduct of all players, managers, coaches and umpires in the game;

4. To have the authority to disqualify any player, coach, manager, or substitute for objecting to the decisions of an umpire, for unsportsmanlike conduct or language, or for any of the reasons enumerated in the Playing Rules, and to eject such disqualified person from the playing field. If the Game Coordinator disqualifies a player while a play is in progress, the disqualification shall not take effect until no further action is possible in that play;

5. To have the sole ability to judge as to whether and when play shall be suspended during a game because of inclement weather conditions or the unfit condition of the playing field; as to whether and when play shall be resumed after such suspension; and as to whether and when a game shall be terminated after such suspension. Game Coordinator shall not call the game until at least thirty minutes after play is suspended. The Game Coordinator may continue suspension as long as there is any chance to resume play. (This supersedes Rule 3.10.)
G. PITCHING MACHINE POLICIES AND PROCEDURES

HARVARD LITTLE LEAGUE 2015

The Ryan Land Fields have electric outlets located behind the mounds for running the HYBSA Pitching Machines during practices and/or games. HYBSA also has a generator that can be used when a pitching machine will be used at other locations. Coaches are to follow the policies and procedures listed below when using the pitching machines.

General Pitching Machine Use:

(1) Pitching Machines are to be set-up and operated by adults / coaches only. This includes feeding the machines and making adjustments.

Using Power Receptacles at Ryan Land Pitching Mounds:

(1) Power receptacles are located within the round, green, ‘hand-holes’ located behind the pitching mounds. The covers are bolted in place. There is a socket wrench located on top of the electric panel in the Equipment Shed that is used to unbolt the covers for removal. It is recommended to unbolt the cover before games (during field preparation) and then return the socket wrench to the shed for the other field to use. The covers should remain in place until the Pitching Machine is set-up for use. When the cover is off and the Pitching Machine is in use, the hole should be covered with one of the 2’x2’ plywood board located in the equipment shed for this purpose.

(2) Power receptacle for Ryan 1 is turned on and off by the circuit breaker located in the electric panel in the Snack Shack (behind cash register). Ryan 2 circuit breaker is located in the electric panel in the Equipment Shed (right hand side / rear from entrance). These circuit breakers are to always be in the off position except during practices and games when the Pitching Machines will be used. Combinations / codes to access the Snack Shack and Equipment Shed will be provided to Team Managers.

(3) Remember to re-install cover on hand-hole behind pitching mound and turn-off power at circuit breaker following games/practices when Pitching Machines / power receptacles are used.

Generator Use:

(1) Check to make sure generators have adequate gasoline prior to start of season, prior to use, and following each use. Notify Equipment Manager or League Coordinator if gasoline is needed.

(2) Generators are only to be operated by adults / coaches.
H. AERIAL VIEW OF RYAN LAND FIELDS

Field 1

Field 2

Equipment Shed

Snack Shack
## I. INCIDENT / INJURY REPORTING FORM

<table>
<thead>
<tr>
<th>Activities/Reporting</th>
<th>A Safety Awareness Program’s Incident/Injury Tracking Report</th>
</tr>
</thead>
<tbody>
<tr>
<td>League Name:</td>
<td>League ID: __________ - __________ Incident Date: ________</td>
</tr>
<tr>
<td>Field Name/Location:</td>
<td>Incident Time: ____________________________</td>
</tr>
<tr>
<td>Injured Person’s Name:</td>
<td>Date of Birth: ____________________________</td>
</tr>
<tr>
<td>Address:</td>
<td>Age: ______ Sex: □ Male □ Female</td>
</tr>
<tr>
<td>City:</td>
<td>State: ______ ZIP: ______ Home Phone: (____)</td>
</tr>
<tr>
<td>Parent’s Name (If Player):</td>
<td>Work Phone: (____)</td>
</tr>
<tr>
<td>Parents’ Address (If Different):</td>
<td>City: ____________________________</td>
</tr>
<tr>
<td>Incident occurred while participating in:</td>
<td></td>
</tr>
<tr>
<td>A.) □ Baseball □ Softball □ Challenger □ TAD</td>
<td></td>
</tr>
<tr>
<td>B.) □ Challenger □ T-Ball (5-8) □ Minor (7-12) □ Major (9-12) □ Junior (13-14)</td>
<td></td>
</tr>
<tr>
<td>C.) □ Tryout □ Practice □ Game □ Tournament □ Special Event</td>
<td></td>
</tr>
<tr>
<td>Travel to □ Travel from □ Other (Describe):: ____________________________</td>
<td></td>
</tr>
</tbody>
</table>

Position/Role of person(s) involved in incident:

D.) □ Batter □ Baserunner □ Pitcher □ Catcher □ First Base □ Second Base
□ 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 or □ Hit by Ball: □ Pitched or □ Thrown or □ Batted
□ Collision with: □ Player or □ Structure □ Grounds Defect □ Other: ____________________________
□ Other: ____________________________

B.) Adjacent to Playing Field
□ Seating Area □ Parking Area □ Car or □ Bike or

C.) Concession Area □ Walking

D.) Off Ball Field
□ Travel: □ Car or □ Bike or
□ Volunteer Worker □ League Activity □ Customer/Bystander
□ Other: ____________________________

Please give a short description of incident: ____________________________

Could this accident have been avoided? How: ____________________________

This form is for Little League purposes only, to report safety hazards, unsafe practices and/or to contribute positive ideas in order to improve league safety. When an accident occurs, obtain as much information as possible. For all claims or injuries which could become claims, please fill out and turn in the official Little League Baseball Accident Notification Form available from your league president and send to Little League Headquarters in Williamsport (Attention: Dan Kirby, Risk Management Department). Also, provide your District Safety Officer with a copy for District files. All personal injuries should be reported to Williamsport as soon as possible.

Prepared By/Position: ____________________________ Phone Number: (____) Signature: ____________________________ Date: (____)

22
J. ACCIDENT NOTIFICATION FORM

LITTLE LEAGUE® BASEBALL AND SOFTBALL
ACCIDENT NOTIFICATION FORM

INSTRUCTIONS

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 30 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 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 policy brochure provided to the league president, or contact Little League Headquarters within the year of injury.

6. Accident Claim Form must be fully completed - including Social Security Number (SSN) - for processing.

<table>
<thead>
<tr>
<th>League Name</th>
<th>League I.D.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Injured Person/Claimant</td>
<td>SSN</td>
</tr>
<tr>
<td>Date of Birth (MM/DD/YY)</td>
<td>Age</td>
</tr>
<tr>
<td>Name of Parent/Guardian, if Claimant is a Minor</td>
<td>Home Phone (Inc. Area Code)</td>
</tr>
<tr>
<td>Address of Claimant</td>
<td>Address of Parent/Guardian, if different</td>
</tr>
</tbody>
</table>

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 | Yes | No | School Plan | Yes | No | Individual Plan | Yes | No | Dental Plan | Yes | No |

Date of Accident | Time of Accident | Type of Injury | AM | PM |

Describe exactly how accident happened, including playing position at the time of accident:

Check all applicable responses in each column:

- BASEBALL
- SOFTBALL
- 6-PLAY BALL
- 6-CHALLENGER
- 6-MINOR
- TAD (2ND SEASON)
- LITTLE LEAGUE (9-12)
- INTERMEDIATE (10-15)
- JUNIOR (12-14)
- SENIOR (13-18)
- BIG (14-18)
- PLAYER
- PLAYER UMPIRE
- MANAGER, COACH
- VOLUNTEER UMPIRE
- TRAVEL TO
- TRAVEL FROM
- SPECIAL EVENT (NOT GAMES)
- SPECIAL GAME(S)
- TRYOUTS
- PRACTICE
- SCHEDULED GAME
- REFERENCES
- VOLUNTEER WORKER
- OTHER (Describe)

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

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

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

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

Date | Claimant/Parent/Guardian Signature
For Residents of California:
Any person who knowingly presents a false or fraudulent claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

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

For Residents of Pennsylvania:
Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

For Residents of All Other States:
Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

---

**PART 2 - LEAGUE STATEMENT (Other than Parent or Claimant)**

<table>
<thead>
<tr>
<th>Name of League Official</th>
<th>Position in League</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address of League Official</th>
<th>Telephone Numbers (Inc. Area Codes)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Residence:</td>
</tr>
<tr>
<td></td>
<td>Business:</td>
</tr>
<tr>
<td></td>
<td>Fax:</td>
</tr>
</tbody>
</table>

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

---

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

<table>
<thead>
<tr>
<th>POSITION WHEN INJURED</th>
<th>INJURY</th>
<th>PART OF BODY</th>
<th>CAUSE OF INJURY</th>
</tr>
</thead>
<tbody>
<tr>
<td>01 1ST</td>
<td></td>
<td></td>
<td>01 BATTED BALL</td>
</tr>
<tr>
<td>02 2ND</td>
<td></td>
<td></td>
<td>02 BATTING</td>
</tr>
<tr>
<td>03 3RD</td>
<td></td>
<td></td>
<td>03 CATCHING</td>
</tr>
<tr>
<td>04 BATTER</td>
<td></td>
<td></td>
<td>04 COLLIDING</td>
</tr>
<tr>
<td>05 BENCH</td>
<td></td>
<td></td>
<td>05 COLLIDING WITH FENCE</td>
</tr>
<tr>
<td>06 BULLPEN</td>
<td></td>
<td></td>
<td>06 FALLING</td>
</tr>
<tr>
<td>07 CATCHER</td>
<td></td>
<td></td>
<td>07 HIT BY BAT</td>
</tr>
<tr>
<td>08 COACH</td>
<td></td>
<td></td>
<td>08 HORSEPLAY</td>
</tr>
<tr>
<td>09 COACHING BOX</td>
<td></td>
<td></td>
<td>09 PITCHED BALL</td>
</tr>
<tr>
<td>10 DOT DROP</td>
<td></td>
<td></td>
<td>10 RUNNING</td>
</tr>
<tr>
<td>11 MANAGER</td>
<td></td>
<td></td>
<td>11 SHARP OBJECT</td>
</tr>
<tr>
<td>12 ON DECK</td>
<td></td>
<td></td>
<td>12 SLIDING</td>
</tr>
<tr>
<td>13 OUTFIELD</td>
<td></td>
<td></td>
<td>13 TAGGING</td>
</tr>
<tr>
<td>14 PITCHER</td>
<td></td>
<td></td>
<td>14 THROWING</td>
</tr>
<tr>
<td>15 RUNNER</td>
<td></td>
<td></td>
<td>15 THROWN BALL</td>
</tr>
<tr>
<td>16 SCORER</td>
<td></td>
<td></td>
<td>16 OTHER</td>
</tr>
<tr>
<td>17 SHORTSTOP</td>
<td></td>
<td></td>
<td>17 UNKNOWN</td>
</tr>
<tr>
<td>18 TO/FROM GAME</td>
<td></td>
<td></td>
<td>18 OTHER</td>
</tr>
<tr>
<td>19 UMPIRE</td>
<td></td>
<td></td>
<td>19 MOUTH</td>
</tr>
<tr>
<td>20 OTHER</td>
<td></td>
<td></td>
<td>20 NECK</td>
</tr>
<tr>
<td>21 UNKNOWN</td>
<td></td>
<td></td>
<td>21 SHOULDER</td>
</tr>
<tr>
<td>22 WARMING UP</td>
<td></td>
<td></td>
<td>22 THROAT</td>
</tr>
<tr>
<td>23 SIDE</td>
<td></td>
<td></td>
<td>23 TOOTH</td>
</tr>
<tr>
<td>24 TESTICLE</td>
<td></td>
<td></td>
<td>24 TESTICLE</td>
</tr>
<tr>
<td>25 WRIST</td>
<td></td>
<td></td>
<td>25 WRIST</td>
</tr>
<tr>
<td>26 UNKNOWN</td>
<td></td>
<td></td>
<td>26 UNKNOWN</td>
</tr>
<tr>
<td>27 FINGER</td>
<td></td>
<td></td>
<td>27 FINGER</td>
</tr>
</tbody>
</table>

---

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
K. VOLUNTEER APPLICATION AND BACKGROUND CHECK FORMS

CORI INSTRUCTIONS
All volunteers involved in Harvard Little League are required to provide information to conduct criminal background checks. Please provide the following information and attach a photocopy of a valid Massachusetts Driver’s license. If you do not have a license, you may use a Passport or other government issued photographic ID.

Managers, coaches, board members and any others, volunteers or hired workers, who provide regular services to Harvard Little League and/or have repetitive access to or contact with players or teams are required to fill out the attached 2015 Little League Volunteer Application form. You must include your social security number on the form where requested. In addition, for compliance with the laws of the Commonwealth of Massachusetts, all volunteers are also required to complete the attached CORI Request Form.

Please be sure to sign both forms. On the CORI Request Form, DO NOT FILL IN THE LAST TWO LINES OF THE FORM.

Please return both forms with a copy of your photo ID to the league’s counsel who will be responsible for conducting the background checks:

Patrick Bunnell
6 Grove Ave
Leominster, MA
978-840-0001

The information you provide and the results of your criminal background check will be kept in a secure location under lock and key at all times. It is your right to request to see the results of the background check. If you would like to see the results, please make a request in writing to Stephen Mirarchi, League President.

It is recommended you keep a copy of these forms for your records.

If you have any questions, please contact Stephen Mirarchi at 508-873-7991 or steveharvard7@gmail.com

**Please note that, per Little League National requirements, anyone who does not complete these forms is automatically ineligible to be a league volunteer or member.**
Harvard Youth Baseball is registered under the provisions of M.G.L. c. 6, § 172 to receive CORI for the purpose of screening current and otherwise qualified prospective employees, subcontractors, or volunteers.

As a prospective or current employee, subcontractor, or volunteer, I understand that a CORI check will be submitted for my personal information to the DCJIS. I hereby acknowledge and provide permission to Harvard Youth Baseball to submit a CORI check for my information to the DCJIS. This authorization is valid for one year from the date of my signature. I may withdraw this authorization at any time by providing Harvard Youth Baseball written notice of my intent to withdraw consent to a CORI check.

FOR EMPLOYMENT, VOLUNTEER, AND LICENSING PURPOSES ONLY:

Harvard Youth Baseball may conduct subsequent CORI checks within one year of the date this Form was signed by me provided, however, that must first provide me with written notice of this check.

By signing below, I provide my consent to a CORI check and acknowledge that the information provided on Page 2 of this Acknowledgement Form is true and accurate.

____________________________  ________________________
Signature                      Date
**SUBJECT INFORMATION:** (An asterisk (*) denotes a required field)

<table>
<thead>
<tr>
<th>*Last Name</th>
<th>*First Name</th>
<th>Middle Name</th>
<th>Suffix</th>
</tr>
</thead>
</table>

Maiden Name (or other name(s) by which you have been known)

<table>
<thead>
<tr>
<th>*Date of Birth</th>
<th>Place of Birth</th>
</tr>
</thead>
</table>

| *Last Six Digits of Your Social Security Number: | - |

Gender:     Height:     Ft.     In.     Eye Color:     Race:  

Driver’s License Number:     State of Issue:  

| Mother’s Full Maiden Name | Father’s Full Name |

Current and Former Addresses:

<table>
<thead>
<tr>
<th>Street Number &amp; Name</th>
<th>City/Town</th>
<th>State</th>
<th>Zip</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The above information was verified by reviewing the following form(s) of government-issued identification:

____________________________________________________________

____________________________________________________________

**VERIFIED BY:**

Name of Verifying Person (Please Print)

____________________________________________________________

Signature of Verifying Person
<table>
<thead>
<tr>
<th>Name</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address</td>
<td>State</td>
</tr>
<tr>
<td>City</td>
<td>State</td>
</tr>
<tr>
<td>Social Security # (mandatory with First Advantage upon request)</td>
<td></td>
</tr>
<tr>
<td>Cell Phone</td>
<td>Business Phone</td>
</tr>
<tr>
<td>Home Phone</td>
<td>Email Address</td>
</tr>
<tr>
<td>Date of Birth</td>
<td></td>
</tr>
<tr>
<td>Occupation</td>
<td></td>
</tr>
<tr>
<td>Employer</td>
<td></td>
</tr>
<tr>
<td>Address</td>
<td></td>
</tr>
<tr>
<td>Special professional training, skills, hobbies:</td>
<td></td>
</tr>
<tr>
<td>Community affiliations (Clubs, Service Organizations, etc.):</td>
<td></td>
</tr>
<tr>
<td>Previous volunteer experience (including baseball/softball and year):</td>
<td></td>
</tr>
</tbody>
</table>

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

Applicant Signature: Date:  
If Minor/Parent Signature: Date:  

Applicant Name (please print or type)  

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

LOCAL LEAGUE USE ONLY:
Background check completed by league officer:

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

Sex Offender Registry [ ] Criminal History Records [ ] First Advantage [ ]

*Please be advised that if you use First Advantage 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 Pennsylvania 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.
Little League® “Returning” Volunteer Application - 2015
Do not use forms from past years. Use extra paper to complete if additional space is required.

If you filled out a volunteer application last year and your league uses the background check tools provided by Little League International, please fill out the returning volunteer application. Otherwise, please use the standard volunteer application.

You must provide information to all the questions in this section.

Have you ever been convicted or plead guilty to any crime(s) involving or against a minor?  
☐ 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 program?  
☐ Yes  ☐ No
If Yes, explain:
___________________________________________________________________________

In which of the following would you like to volunteer? (Check one or more)
☐ League Official  ☐ Manager  ☐ Coach  ☐ Umpire  ☐ Field Maintenance
☐ Score Keeper  ☐ Concession Stand  ☐ Other:

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

Applicant Name (please print or type): ________________________________
Applicant Signature: __________________________ Date: ______

If Minor — Parent Signature: __________________________ Date: ______

Please update ONLY the information in this section which has changed since last year.

Name: __________________________ Address: __________________________
City: __________________________ State: __________________________ ZIP: __________
Home Phone: __________________________ Cell Phone: __________________________
Work Phone: __________________________ E-Mail Address: __________________________
Driver’s License #: __________________________ State: __________________________
Occupation: __________________________ Address: __________________________
Employer: __________________________ Address: __________________________

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

Name / Phone / __________________________

Special professional training, skills, hobbies:

Special Certifications (CPR, Medical, etc): __________________________

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

Local League Use Only:

Background Check completed by league officer on: __________________________

Systems used for background check (minimum of one must be checked):
☐ Sex Offender Registry  ☐ Criminal History Records  ☐ First Advantage

*Please be advised if you are First Advantage 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 First Advantage in compliance with the Fair Credit Reporting Act containing information regarding all criminal associations 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.

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.
This page confirms the completion of the 2015 online Facility Survey

Harvard Youth Baseball and Softball
League Name

04
District #

221-04-78331
League ID #

Submit this page with your hardcopy ASAP plan rather than the completed 2015 Facility Survey