

**SNYDER LITTLE LEAGUE  
DISTRICT 5- Snyder, Texas**



## **2024 Snyder Little League Safety Plan**

**League ID: 3430515**

**Prepared by:**

**Billy Mebane, Safety Officer- Snyder Little League**

**(c) 325-518-6281**

**[bwmebane95@gmail.com](mailto:bwmebane95@gmail.com)**

**Snyder Little League – 3303 Irving St., Snyder, TX 79549**

**[snyderlittleleague@gmail.com](mailto:snyderlittleleague@gmail.com)**

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# **SNYDER LITTLE LEAGUE SAFETY PLAN**

The goal of the Safety Plan is to develop guidelines for increasing the safety of activities, equipment, and facilities through education, compliance, and reporting. In support of the attainment of this goal, Snyder Little League also commits itself to providing the necessary organizational structure to develop, monitor, and enforce the aspects of the plan. The Safety Plan, by reference, includes the Snyder Little League's Safety Code, the Snyder Little League's Code of Conduct, and the Snyder Little League's Safety Manual. The combination of these documents outlines specific safety issues and the Snyder Little League's policy or procedure for each issue. All participants, volunteers, employees, spectators, and guests are bound by the guidelines set forth in these documents.

### **SLL Safety Code**

- Responsibility for safety procedures should be that of an adult member of Snyder Little League.
- Arrangements should be made in advance of all games and practices for emergency medical services.
- Managers, coaches, and umpires should have some training in first-aid. First Aid Kit will be available at the concession stand.
- No games or practices should be held when weather or field conditions are not safe for play, particularly when lightning is in the area.
- Fields should be inspected prior to games or practices for holes, damage, glass and other foreign objects that may put a player at risk for injury.
- All team equipment should be stored within the team dugout, or behind fenced area, and not within the area defined by the umpires as “in play.”
- Only players, managers, coaches, designated adults and umpires are permitted on the playing field or in the dugout during games.
- Responsibility for keeping bats and loose equipment off the field of play should be that of the team's manager, coaches, designated player, or designated adult.
- Procedures should be established for retrieving foul balls batted out of the playing area.
- During practice and games, all players should be alert and watch the batter on each pitch.
- During warm-up drills players should be spaced so that no one is endangered by wild throws or missed catches.
- All pre-game warm-ups should be performed within the confines of the playing field and not within areas that are frequented by, and thus endanger spectators (i.e., playing catch, pepper, swinging bats, etc.)
- Equipment should be inspected regularly for the condition of the equipment as well as for proper fit.
- Batters must wear Little League approved protective helmets during batting practice and games.
- Catcher must wear catcher’s helmet/mask, throat guard, long model chest protector, shin guards and protective cup with athletic supporter at all times (males) for all practices and games (Farm Divisions and up). Managers should encourage all male players to wear protective cups and supporters for practices and games.
- During sliding practice, bases should not be strapped down and should be located away from the base anchoring system.
- At no time should “horse play” be permitted on the playing field.
- Parents of players who wear glasses should be encouraged to provide “Safety Glasses.”
- Players are not permitted to wear watches, rings, pins or metallic items during games and practices.
- The Catcher must wear catcher’s helmet/mask with a throat guard in warming up pitchers. This applies between innings and in the bullpen practice.

## Some Important 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.
- Know First Aid Kit is available in concession stand.
- 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.
- 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 not sure of the proper procedures (i.e., CPR, etc.).
- Transport injured individuals except in extreme emergencies.
- Leave an unattended child at a practice or game.
- Hesitate to report any present or potential safety hazard to the Safety Officer immediately.

## **Snyder Little League Safety Plan Availability**

This safety plan will be made available to all managers, coaches, board members and others involved in League activities. It will be posted and published to the Snyder Little League website and updated annually. It will provide the guidelines and instructions for the safe operations of the leagues.

We expect all League volunteers, players and parents to abide by the plan and make safety a high priority in all League activities.

## **Safety Officer**

One of the elected members on the SLL Board is the Safety Officer. For the 2022 season, the Safety Officer is Holly Copher, who, along with the other members of the Board comprises the Safety Committee. This individual serves as Snyder Little League's primary point of contact for the creation and enactment of the Safety Plan. The Safety Officer authors or modifies the League's Safety Plan, Code of Conduct, Safety Code, and Safety Manual each year, as necessary. These documents are then presented to the Board for approval and ratification for the upcoming season.

The ultimate responsibility for ensuring compliance of the Safety Plan lies with the Safety Officer. However, due to the size of Snyder Little League, and to provide more width to the enforcement of the plan, all board members are tasked with ensuring the overall Safety Plan compliance with respect to the level-of-play specified below:

**Safety Officer's Responsibilities** – Within 48 hours of receiving the incident report, the Safety Officer is expected to 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;

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. To check if any other assistance is necessary until such time as the incident is considered "closed".

**SNYDER LITTLE LEAGUE BOARD MEMBERS CONTACT INFORMATION:**

| <b>BOARD POSITION</b>                    | <b>NAME</b>     | <b>PHONE NUMBER</b> | <b>EMAIL ADDRESS</b>           |
|--|-----------------|---------------------|--------------------------------|
| President                                | Nick Barboza    | 325-575-0267        | nickbarboza10@gmail.com        |
| VP/Coaching Coordinator                  | Steven Martinez | 325-574-3505        | stevendanielmartinez@yahoo.com |
| Secretary                                | Courtney Boyd   | 325-436-1342        | cjboyd10@live.com              |
| Treasurer                                | Hunter Cox      | 325-436-9857        | accounting@thunderbirdsvcs.com |
| Player Agent/Umpire Coordinator          | Ben Boyd        | 325-574-0443        | boydben@live.com               |
| Equipment Manager                        | Adrian Perez    | 325-436-9571        | adrianjperez03@gmail.com       |
| Safety Officer                           | Billy Mebane    | 325-518-6281        | bwmebane95@gmail.com           |
| Safety Officer                           | Hayden Hayes    | 210-247-8774        | hayden.hayes@gmail.com         |
| Public Relations/Sponsorship Coordinator | Shelby Bufkin   | 325-574-0805        | shelbybufkin@gmail.com         |
| Concession Manager                       | Ryan Arredondo  | 325-515-8634        | rarredondo@snyderisd.net       |
| Field Manager                            | Jason Lawson    | 325-514-7164        | lawdog1025@yahoo.com           |
| Field Manager                            | Scott Crenwelge | 325-575-2278        | scottcrenwelge@yahoo.com       |
| Field Manager                            | Rick Hopper     | 325-575-0073        | dahop72@yahoo.com              |

**SNYDER EMERGENCY CONTACT INFORMATION:**

|                       |                                      |
|-----------------------|--------------------------------------|
| Snyder Police Dept    | 325-573-2611 or 911 for an Emergency |
| Scurry County Sheriff | 325-573-3551 or 911 for an Emergency |
| Snyder VFD            | 325-573-6215 or 911 for an Emergency |
| Citizens EMS          | 325-573-1912 or 911 for an Emergency |
| Poison Control        | 1-800-222-1222                       |
| Child Abuse Hotline   | 1-800-720-7777                       |

**SNYDER LITTLE LEAGUE**  
**EMERGENCY PLAN**

1. Stay calm. Can you handle the problem? Do you need help?
  - a. Determine if the injury is Simple or Serious
  - b. If you can handle the situation, proceed with proper first aid.
  - c. The most important help you can provide to a victim who is seriously injured is to call for professional medical help. Make the call quickly, preferably from a cell phone near the injured person. If this is not possible, send someone else to make the call from a nearby telephone. Be sure that you or another caller follows these steps.
    - i. **First dial 9-1-1.**
    - ii. Give the dispatcher the necessary information. Answer any questions that he or she might ask. Most dispatchers will ask:
      1. **The exact location or address of the emergency?** Include the name of the city or town, nearby intersections, landmarks, etc. as well as the field name and location of the facility, if applicable.  
Our address is: Buck Logan, Snyder, TX  
Cross-streets are: Houston Ave. and 45th St.
      2. **The telephone number from which the call is being made?**
      3. **The caller's name?**
      4. **What happened** — i.e., a baseball-related accident, bicycle accident, fire, fall, etc.?
      5. **How many people are involved?**
      6. **The condition of the injured person** — i.e., unconscious, chest pains, or severe bleeding?
      7. **What help is being given** (first aid, CPR, etc.)?
    - iii. **Do not hang up until the dispatcher hangs up.** The dispatcher may be able to tell you how to best care for the victim.
    - iv. Continue to care for the victim until professional help arrives.
    - v. 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. Provide supervision for the other players. Be sure they know what to do when one of their teammates is injured or a player on another team. Should practice or game continue?
      1. If the parents are not at the field be sure to call them ASAP.
      2. If an athlete will be going to the hospital be sure to send their Accident Form with them.
      3. Players cannot go to the hospital without a coach or parent.
      4. Make an accurate record of the injury. Be sure to note the following:
        - a. Time when injury occurred.
        - b. Who, What, When, Where, Why the injury occurred?
        - c. Treatment given.

Please Deliver or e-mail a report to Holly Copher, Safety Officer, within 24-48 hours.



# Player Equipment

## Inspection and Quality

The Equipment Manager shall be responsible for ensuring that the inventory of player equipment is of acceptable quality, in good condition and safe for play.

Each year before issuing equipment, the Equipment Manager shall inspect all bats, gloves, catcher's equipment, batting helmets etc. to be issued to players and Managers. Any damaged equipment, or equipment found not to fully meet safe standards should be repaired or discarded. No incomplete or damaged equipment is to be issued to players or Managers.

Each Manager, upon receiving his/her equipment shall inspect all equipment to ensure that it is in good repair, complete, and safe to use. Any equipment found not to be so shall be returned to the Equipment Manager to be fully repaired or destroyed and discarded. The Equipment Manager shall replace any such equipment.

## Practices and Equipment

Catcher: In practice or warm-ups where no batter is present, the player serving as catcher must at a minimum always wear a catcher's helmet/mask and protective cup. Batting helmets: All batters and runners must wear an approved Little League batting helmet. Players in Farm Division playing pitcher position will wear helmets with face protection. Any helmets where padding is damaged, or plastic is cracked, chipped or notably stressed are not to be used. Player may provide their own helmet that meets league requirements. If player is unable to provide own helmet, parent/guardian may notify the Equipment Manager and the league will provide a helmet for the player to check out for use for the season.

Fit: It shall be the responsibility of the Manager to properly fit the catcher's equipment and the batting helmets.

Bats: Little League International has assembled an online resource page dedicated to baseball bat information. Follow the link below to find the latest bat information, including the 2018 USA Baseball Bat Standard implementation with rules and regulations governing bats, definition of terms, and a series of frequently asked questions, with answers and licensed bat information.

<https://www.littleleague.org/playing-rules/bat-information/>

Catcher's helmets: Mask must be properly adhered and all straps must be in place and functional; must be fully padded; must have dangling throat guard.

Catcher's chest protector: All straps must be in place and functional.

Catcher's shin guards: All straps must be in place and functional.

Catcher's glove: All leather lacing must be in place and secured.

All players are expected to wear appropriate safety equipment (i.e. cups) at all practices and games.

## **Facilities and Field Equipment**

### **Inspection/Annual Little League Facility Survey**

Prior to the season, the Safety Officer and Field Manager shall inspect each field as part of this Safety Plan and reporting requirements. They will conduct a physical review of the fields for changes and needs from the prior year's survey. The League Safety Officer will complete an Annual Little League Facility Survey by conducting a physical review of the fields for changes and needs from the prior year's survey. All new changes and needs will be noted on the Facility Survey in the Little League Data Center. In addition, the Safety Officer and League President will keep a copy of the completed survey on file for future needs.

### **Equipment**

Prior to the beginning of each season, the Equipment Manager, and Field Manager will inspect each storage shed to ensure that proper storage conditions exist and that all equipment and supplies are complete and in good repair. Any equipment and supplies that are unusable or deemed as unsafe will be replaced.

### **Telephones**

The primary means for emergency communications at all fields is cell phones.

### **Fundamentals Training**

Fundamentals training will be provided for all coaches/managers. At least one coach or manager from each team must attend.

### **Little League Rule Enforcement**

Snyder Little League requires all teams to enforce all Little League Rules and Regulations during games and practices.

# Concession Stand

## Food Handling

Concession volunteers will be instructed to wash hands prior to beginning shift.

Appropriate tissues and gloves shall be provided, and all unpackaged foods shall be handled using such skin barriers.

Every worker must be instructed on these guidelines before they can work:

- Wash your hands regularly:
  - Use soap and warm water.
  - Rub your hands vigorously as you wash them.
  - Wash all surfaces including the backs of hands, wrists, between fingers and under fingernails.
  - Rinse hands well.
  - Dry hands well.
  - Dry hands with paper towels.
  - Turn off water using paper towel, instead of your bare hands.
- Wash your hands in this fashion before you begin work and especially after performing any of these activities:
  - After touching bare human body parts other than clean hands and clean exposed portions of arms.
  - After using restrooms.
  - After caring for or handling animals.
  - After coughing, sneezing, using a handkerchief or disposable tissue.
  - After touching soiled surfaces.
  - After drinking, using tobacco, or eating.
  - During food preparation.
  - When switching from raw to ready to eat foods.
  - After engaging in activities that contaminate hands

## Basic Rules:

1. Cook food thoroughly. Use a meat thermometer. Keep hotdogs and burgers at 41 degrees when cold and cook to 155 degrees or above when hot.
2. Rapidly reheat foods to 165 degrees. Slow cooking devices may activate bacteria and never reach killing temperatures.
3. All foods that require refrigeration must be cooled to 41 degrees F. as quickly as possible and held there until ready to use. To cool foods quickly, use the ice water bath (60% ice and 40% water), stirring the product frequently, or place their food in shallow pans no more than 4 inches in depth and refrigerate. Pans should not be stored one on top of the other and lids should be off or afar until the food is completely cooled. Check the temperature periodically to see if the food is cooling properly. **DO NOT LEAVE FOOD OUT AT ALL!!**

4. FREQUENT AND THOROUGH HANDWASHING IS REQUIRED.
5. Only healthy people should prepare and serve food. Anyone with any symptoms of disease (cramps, nausea, fever, vomiting, diarrhea, cough etc.) or who has open sores or infected cuts on the hands should not be allowed in the food concession area. Workers' clothes should be clean, and they should not smoke in the concession area.
6. Food handling: Avoid hand contact with raw food, ready-to-eat foods and food contact surfaces. Use a utensil and/or glove.
7. Use disposable utensils for food service. Keep your hands away from food contact surfaces and never reuse disposable dishware. Ideally utensils should be washed in a four-step method:
  - a. Hot soapy water,
  - b. Rinsing in clean water,
  - c. Chemical or heat sanitizing,
  - d. Air drying.
8. Ice that is 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 hands.
9. Wiping cloths should be rinsed and stored in a bucket sanitizer. (1-gallon water and ½ tsp. chlorine bleach. Change the solution every 2 hours.
10. Insect control and waste. Keep foods covered to protect from insects. Store pesticides away from food. Place garbage and paper waste in a refuse container with a lid that fits tightly. Dispose of all water in the restrooms, do not pour outside. All water that is used should be potable from an approved source.
11. Keep food stored off the floor at least 6 inches. After your event is finished, clean the concession area and discard any unusable food. Do not save food for reheating.

## **THE TOP SIX CAUSES FOR ILLNESS**

1. Inadequate cooling and cold holding.
2. Preparing food too far in advance of service.
3. Poor personal hygiene and infected personnel.
4. Inadequate reheating.
5. Inadequate hot holding.
6. Contaminated raw foods and ingredients.

## **Food Storage**

Perishable foods shall not be re-prepared. Cheese for nachos, hot dogs, hamburgers etc should be disposed of if heated and not sold.

Perishable foods shall be stored in the refrigerator, and disposed of at the perish date.

## **Concession Stand Safety**

The cooking facilities in the concession stand area contain fire extinguishers and first aid equipment. A list of all board members including cell phone #'s is posted at concession stand order to allow the concession stand manager to be in constant contact with the board member present at the complex when games are being played.

The Concession Manager will check all concession equipment and cooking devices to ensure they are in good working order. If there is any cooking equipment that is malfunctioning or not working properly, it will not be utilized in the concession stand until properly repaired.

Concession stand will be cleaned with appropriate disinfectant nightly in order to prevent any food/debris left on countertops or floors.

# Concession Stand Tips

## SAFETY FIRST

### Requirement 9

#### *12 Steps to Safe and Sanitary*

#### *Food Service Events: The*

*following information is*

*intended to help you run a*

*healthful concession stand.*

*Following these simple*

*guidelines will help minimize*

*the risk of foodborne illness.*

*This information was provided*

*by District Administrator*

*George Glick, and is excerpted*

*from "Food Safety Hints" by*

*the Fort Wayne-Allen County,*

*Ind., Department of Health.*

#### **1. Menu.**

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

#### **2. Cooking.**

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

#### **3. Reheating.**

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

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

#### **4. Cooling and Cold Storage.**

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

#### **5. Hand Washing.**

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

#### **6. Health and Hygiene.**

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

#### **7. Food Handling.**

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

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

#### **8. Dishwashing.**

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

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

#### **9. Ice.**

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

#### **10. Wiping Cloths.**

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

#### **11. Insect Control and Waste.**

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

#### **12. Food Storage and Cleanliness.**

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

#### **13. Set a Minimum Worker Age.**

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

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

# Volunteers Must Wash Hands

## HOW



## WHEN

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

### Wash after you:

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

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

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

### Wear gloves.

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

### If you wear gloves:

- ▶ wash your hands before you put on new gloves

### Change them:

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

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



**UMASS  
EXTENSION**

# First Aid and Accidents

## First Aid Kits

It shall be the responsibility of the Safety Officer to supply a complete first aid kit to be stored in the concession stand, and to stock and replenish as needed.

## Accident Reporting

**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 Safety Officer. 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 be reported to the Safety Office or a member of the Board within 24-48 hours of the incident.

**How to make the report** – Reporting incidents can come in a variety of forms. Most typically, they are telephone conversations. At a minimum, the following information must be provided:

1. The name and phone number of the individual involved.
2. The date, time, and location of the incident.
3. As detailed a description of the incident as possible.
4. The preliminary estimation of the extent of any injuries.
5. 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 is expected to 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

If the extent of the injuries is more than minor in nature, the Director of Safety 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 until such time as the incident is considered “closed”.

Safety Officer will track ‘near-misses’ as a proactive tool to prevent future injuries. Safety Officer will notify all other board members of any injuries, incidents, or ‘near-misses’.

**Accident Claim Form** can be found at the following link:

<https://www.littleleague.org/downloads/accident-claim-form/>

**Incident/Injury Tracking Form** can be found at the following link:

<https://www.littleleague.org/downloads/incident-injury-tracking-form/>



## **Training**

Safety rules require all coaches and/or managers to have training in First Aid and coaching training. Each team must have the manager and/or coaches obtain First Aid training and coaching training annually.

## **Volunteer Applications and Background Checks**

Volunteers as designated below shall be required to complete the Little League Volunteer Application Form and sign the waiver providing permission for a background check. They must also supply a photo ID.

Volunteers who must comply are:

- Members of the Board of Directors
- Managers
- Coaches
- Team Parents
- Team Volunteers

For purposes of this requirement, coaches shall include all Managers, coaches, board members, and any other persons, volunteers or hired workers, who provide regular service to the league and/or have repetitive access to or contact with players or teams must fill out application form as well as provide a government-issued photo identification card for ID verification. League will check name spellings and numbers for accuracy.

Anyone refusing to complete the Volunteer Application or to sign its background check waiver is ineligible to participate in any roles described above.

The League President shall ensure that Volunteer Application Forms have been completed and submitted by all designated volunteers, conduct the sex offender background checks, and retain the forms for the year of service. Background checks will include a nationwide background check utilizing JDP or a provider comparable to JDP in accessing background check records for sex offender registry data and other criminal records.

For more information regarding JDP background checks, go to the following link:

<https://www.jdp.com/littleleague-backgroundcheck/>



# Little League® Volunteer Application – 2023

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



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

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

**All RED fields are required.**

Name \_\_\_\_\_ Date \_\_\_\_\_  
First Middle Name or Initial Last

Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Social Security # (mandatory)** \_\_\_\_\_

Cell Phone \_\_\_\_\_ Business Phone \_\_\_\_\_

Home Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Date of Birth \_\_\_\_\_

Occupation \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_

Special professional training, skills, hobbies: \_\_\_\_\_

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

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

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

2. Special Certification (CFR, Medical, etc.)? If yes, list: \_\_\_\_\_  
 Yes  No

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

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

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

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

7. Have you ever been refused participation in any other youth programs and/or listed on any youth organization ineligible list?  
If yes, explain: \_\_\_\_\_  
(If volunteer answered yes to Question 7, the local league must contact Little League International.)  
 Yes  No

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

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

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

**IF YOU LIVE IN A STATE THAT REQUIRES A SEPARATE BACKGROUND CHECK BY LAW, PLEASE ATTACH A COPY OF THAT STATE'S BACKGROUND CHECK FOR MORE INFORMATION ON STATE LAWS. VISIT OUR WEBSITE: [LittleLeague.org/BgCheckStates](http://LittleLeague.org/BgCheckStates)**

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's Signature \_\_\_\_\_ Date \_\_\_\_\_

If Minor/Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Applicant Name (please print or type) \_\_\_\_\_

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

### LOCAL LEAGUE USE ONLY:

Background check completed by league officer \_\_\_\_\_ on \_\_\_\_\_  
System(s) used for background check (minimum of one must be checked):  
**Review the Little League Regulation 1(c)(9) for all background check requirements**

JDP (Includes review of the US, Center of SafeSport's Centralized Disciplinary Database and Little League International Ineligible/Suspended List)\*  
OR \_\_\_\_\_

National Criminal Database check  U.S. Center of SafeSport's Centralized Disciplinary Database and Little League International Ineligible/Suspended List  
 National Sex Offender Registry

\*Please be advised that you use JDP and there is a name match in the few states where only name match searches can be performed you should notify volunteers that they will receive a letter or email directly from JDP in compliance with the Fair Credit Reporting Act containing information regarding all the criminal records associated with the name, which may not necessarily be the league volunteer.  
**Only attach to this application copies of background check reports that reveal convictions of this applicant.**

## **Player Registration Data/Coach Data**

Player registration data and Coach data is submitted via the Little League Data Center at: [www.littleleague.org](http://www.littleleague.org) .

## **Medical Release, Parent Contact Information**

Each player shall have a medical release and parent contact form completed each year at registration. No child may play or practice if the league has not received the medical release/parent contact form.

## **WHAT PARENTS SHOULD KNOW ABOUT LITTLE LEAGUE INSURANCE**

The Little League Insurance program is designed to afford protection to all participants at the most economical cost to the local league. It can be used to supplement other insurance carried under a family policy or insurance provided by the parents' employer(s). If there is no other coverage, Little League Insurance – which is purchased by the league, not the parent – takes over and provides benefits, after a deductible per claim, for all covered injury treatment costs up to the maximum stated benefits. This plan makes it possible to offer exceptional, low cost protection with assurance to parents that adequate coverage is in force at all times during the season. If your child sustains a covered injury while taking part in Little League Baseball, here is how the insurance works:

1. File claim initially under the insurance carried by the family.
2. Should your family insurance plan not fully cover the injury treatment, the Little League insurance policy will help pay the difference after a deductible per claim, up to the maximum stated benefit. This includes any deductibles or exclusions in your own insurance.
3. If your child is not covered by any family insurance, the Little League insurance policy becomes primary and will provide benefits for all covered injury treatment costs, after a deductible per claim, up to the maximum benefits of the policy.
4. Treatment of dental injuries can extend beyond the normal 52-week period if dental work must be delayed due to physiological changes of a growing child. Benefits will be paid at the time treatment is given, even though it may be some years later. There is a maximum dollar benefit for eligible dental treatment after the normal 52-week period subject to the claim deductible.

We hope this brief summary has been helpful in a better understanding of an important aspect of the operation of the Little League endorsed insurance program.

## **Filing an Insurance Claim**

### **Filing Information**

For insurance filing, please follow the instructions given by the National Little League.

Insurance information can be found on the National Little League Site by contacting: Brent Stahlnecker, Assistant Director of Risk Management and Insurance Operations, at: [bstahlnecker@littleleague.org](mailto:bstahlnecker@littleleague.org); or call 570-326-1921, ext. 2258.

The Claim Form can be found at:

<https://www.littleleague.org/university/articles/how-to-submit-an-accident-insurance-claim/>

## CHECKING FIELD CONDITIONS

Prior to every game/practice, a coach or manager from each team will walk the playing field and look for any hazards: Debris/Foreign Objects, rocks, glass, holes in the field. The coach will check the condition of fences, backstops, and bases and will report any hazards immediately to a board member prior to players entering the field.



## HEY COACH, HAVE YOU:

---

- ✓ **Walked field for debris/foreign objects**
- ✓ **Inspected helmets, bats, catchers' gear**
- ✓ **Made sure a First Aid kit is available**
- ✓ **Check conditions of fences, backstops, bases and warning track**
- ✓ **Made sure a cell phone is available in case of an emergency**
- ✓ **Held a warm-up drill**

## **SNYDER LITTLE LEAGUE CODE OF CONDUCT**

- The speed limit is 15 mph in roadways and parking lots while attending any Snyder Little League function. Watch for small children around parked cars.
- No alcohol or tobacco allowed in any parking lot, field, or common areas within the Snyder Community Park
- No playing in parking lots at any time.
- No playing on and or around lawn/field management equipment.
- Always be alert for traffic.
- No profanity please.
- No throwing rocks.
- No climbing fences.
- Only a player at bat or on-deck in designated on-deck area, may swing a bat on the field. Be alert of the area around you when swinging the bat while in the on-deck position.
- Observe all posted signs. Players and spectators should be Alert at all times for Foul Balls and Errant Throws.
- During the game, players must remain in the dugout area in an orderly fashion at all times, except if at bat or on-deck.
- After each game, each team must clean up trash in the dugout.
- All gates to the field must remain closed at all times. After players have entered or left the playing field, gates should be closed and secured.

Note: Failure to comply with the above may result in expulsion from the Snyder Little League field or Snyder Community Park complex.

## **ARE MANAGERS AND COACHES 'EXPECTATIONS' REASONABLE AND CONSISTENT?**

### **WHAT DO MANAGERS AND COACHES EXPECT FROM THE PLAYERS?**

- To be on time for all practices and games.
- To always do their best whether on 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 and losing are equally important lessons to teach the players, as both are important parts of any sport.

### **WHAT DO PLAYERS & THEIR FAMILIES EXPECT FROM MANAGERS AND COACHES?**

- To be on time for all practices and games.
- To be as fair as possible in giving playing time to all players.
- To do the best job possible 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 be disrespectful to any member of their team, the opposing team or umpires. Any confrontation will be handled in a respectful, quiet, and individual manner.

### **WHAT DO MANAGERS & COACHES EXPECT FROM 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 yell disrespectfully at the players, the umpires or me. 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. It will also be available if you wish to offer your services at practice. A helping hand is always welcome.

Finally, don't expect the majority of children playing Little League baseball to have strong skills. We hear all our lives that we learn from our mistakes. Let's allow them to make their mistakes, but always be there with positive support to lift their spirits!

## **PRESS BOX AND STORAGE AREA PROCEDURES**

The following applies to all of the press boxes/scorekeeping areas and storage areas used by Snyder Little League and apply to anyone who has been issued a key by Snyder Little League to use/access those storage areas.

- All individuals with keys to the Snyder Little League press boxes/storage areas (i.e., managers, umpires, etc.) are aware of their responsibilities for the orderly and safe storage, bases, umpire equipment etc.
- Before you use any machinery located in storage, (scoreboards, speakers, etc.) please locate and read the written operating procedures for that equipment.



## GENERAL HEALTH PROCEDURES

### **Communicable Disease Procedures:**

- Bleeding must be stopped, the open wound covered, and the uniform cleaned/changed if there is blood on it before the athlete may continue.
- Routinely use gloves, to prevent mucous membrane exposure, when contact with blood or other body fluids are anticipated (provided in first-aid kit).
- Immediately wash hands and other skin surfaces if contaminated with blood or other bodily fluids.
- Clean all blood/bodily fluid contaminated surfaces and equipment with appropriate disinfectant.
- Managers, coaches, and volunteers with open wounds should refrain from all direct contact until the condition is resolved, or cover area prior to games/practices.
- Follow accepted guidelines in the immediate control of bleeding and disposal when handling bloody dressings, mouth guards and other articles containing body fluids.
- Snyder Little League will follow the current CDC guidelines regarding COVID and COVID exposure. If a player tests positive for COVID please contact your coach or Safety Officer immediately. Current CDC Guidelines regarding COVID can be found at the following link:  
<https://www.cdc.gov/coronavirus/2019-nCoV/index.html>

### **When Treating an Injury, Remember:**

Rest Ice Compression Elevation Support

**Remember, safety is everyone's job. Prevention is the key to reducing accidents to a minimum. Report all hazardous conditions to the Safety Officer or another Board member immediately. Don't play on a field that is not safe or with unsafe playing equipment. Be sure your players are fully equipped at all times, especially catchers and batters. And, check your team's equipment often.**

### **Concussions in Youth Athletes**

Little League Baseball, Incorporated has published a summary of all currently existing state laws regarding concussions in youth athletes, which can be found here:

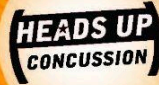
<https://www.littleleague.org/player-safety/concussions-youth-athletes/>

Snyder Little League understands the importance of properly recognizing and dealing with a youth athlete having a concussion, and requires all of its managers and coaches to take the online training offered by The CDC at <https://headsup.cdc.gov/>.

The CDC has also made a concussion safety app, called "CDC HEADS UP Rocket Blades". More information on the app is available at <https://www.cdc.gov/headsup/resources/app.html> , and all managers, coaches, umpires, and volunteers are encouraged to install it on their smartphone.

The following pages contain fact sheets for The CDC's "Heads Up" program:

<https://www.cdc.gov/headsup/resources/custom.html> .



# CONCUSSION in SPORTS



## STATISTICS

In 2009,  
**NEARLY 250,000**  
**KIDS AND TEENS**

were treated in emergency departments for sports and recreation-related TBI, including concussion.

WHEN IN DOUBT,  
**>> SIT THEM OUT!**

WHEN APPROPRIATE MAKE SURE AN ATHLETE USES THE CORRECT HELMET FOR THEIR ACTIVITY.



Wearing a helmet can help protect athletes from serious brain or head injuries.

THERE IS NO "CONCUSSION-PROOF" HELMET.

## LEARN CONCUSSION SIGNS SYMPTOMS



SEE FULL LIST OF SYMPTOMS @

[www.cdc.gov/Concussion](http://www.cdc.gov/Concussion)

## if YOU THINK AN ATHLETE HAS A CONCUSSION

USE THE HEADS UP ACTION PLAN

- 1 Remove the athlete from play.
- 2 Keep the athlete out of play the day of the injury.
- 3 An athlete should only return to play with permission from an appropriate health care professional.

## HELP KEEP ATHLETES SAFE from CONCUSSIONS AND OTHER SERIOUS BRAIN INJURIES



Remind your athletes to tell coaching staff right away if they think they have a concussion or that a teammate has a concussion.



Make sure that athletes follow the rules for safety and the rules of the sport.



Encourage athletes to practice good sportsmanship at all times.



Keep the Heads Up Action Plan at all games and practices.



U.S. Department of Health and Human Services  
Centers for Disease Control and Prevention

LEARN more AT:

[www.cdc.gov/Concussion](http://www.cdc.gov/Concussion)

# SNYDER LITTLE LEAGUE CONCUSSION ACTION PLAN:

## HEADS UP CONCUSSION



### SIGNS AND SYMPTOMS

Athletes who experience one or more of the signs or symptoms listed below after a bump, blow, or jolt to the head or body may have a concussion.

#### > SIGNS OBSERVED BY COACHING STAFF

- Appears dazed or stunned
- Is confused about assignment or position
- Forgets an instruction
- Is unsure of game, score, or opponent
- Moves clumsily
- Answers questions slowly
- Loses consciousness (even briefly)
- Shows mood, behavior, or personality changes
- Can't recall events prior to hit or fall
- Can't recall events after hit or fall

#### > SYMPTOMS REPORTED BY ATHLETE

- Headache or "pressure" in head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Sensitivity to light
- Sensitivity to noise
- Feeling sluggish, hazy, foggy, or groggy
- Concentration or memory problems
- Confusion
- Just not "feeling right" or is "feeling down"



### ACTION PLAN

As a coach, if you think an athlete may have a concussion, you should:

1. **Remove the athlete** from play.
2. **Keep an athlete with a possible concussion out of play on the same day of the injury and until cleared by a health care provider.** Do not try to judge the severity of the injury yourself. Only a health care provider should assess an athlete for a possible concussion.
3. **Record and share information about the injury**, such as how it happened and the athlete's symptoms, to help a health care provider assess the athlete.
4. **Inform the athlete's parent(s) or guardian(s)** about the possible concussion and refer them to CDC's website for concussion information.
5. **Ask for written instructions from the athlete's health care provider** about the steps you should take to help the athlete safely return to play. Before returning to play an athlete should:
  - > Be back to doing their regular school activities.
  - > Not have any symptoms from the injury when doing normal activities.
  - > Have the green-light from their health care provider to begin the return to play process.

**IT'S BETTER TO MISS ONE GAME THAN THE WHOLE SEASON.**



For more information and to order additional materials **free-of-charge**, visit: [www.cdc.gov/HEADSUP](http://www.cdc.gov/HEADSUP).

You can also download the CDC **HEADS UP** app to get concussion information at your fingertips. Just scan the QR code pictured at left with your smartphone.



Centers for Disease Control and Prevention  
National Center for Injury Prevention and Control

The information provided in this document or through linkages to other sites is not a substitute for medical or professional care. Questions about diagnosis and treatment for concussion should be directed to a physician or other health care provider.

## **SAFETY AND THE WEATHER**

**GAME AND/OR PRACTICE PLAY WILL BE STOPPED WHEN A LIGHTNING STRIKE IS DETECTED WITHIN A TEN (10) MILE RADIUS OF PLAY. PLAY MAY ONLY BE RESUMED WHEN THIRTY (30) MINUTES HAVE PASSED AFTER LAST LIGHTNING STRIKE WITHIN TEN (10) MILE RADIUS AS DETERMINED BY UMPIRE OR BOARD MEMBER.**

### **Lightning Facts and Safety Procedures**

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 strikes 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 at risk for lightning strikes.

**Nearby lightning strikes will be monitored by a board member or umpire, by lightning strikes or weather app. If smartphone or app is unavailable, then the following methods may be implemented:**

#### **“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.

#### **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 – regardless of whether or not the lightning detector goes off via app, or if the “flash-bang” proximity measure applies. When in doubt, the following rule of thumb should be applied:

### **WHEN YOU HEAR IT – CLEAR IT**

#### **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).

**No one may return to the field to resume play until 30 minutes after the last lightning strike within a ten mile radius of play as determined by umpire or board member.**

### **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 and starting CPR if indicated, 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 AED is available send another bystander to retrieve AED while continuing CPR, if indicated.