

NORTH BOTHELL LITTLE LEAGUE

BOTHELL, WA



Safety Manual 2026

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A Culture of Safety

North Bothell Little League takes safety very seriously!

We strive to provide a safe environment where our youth, coaches, and volunteers feel protected.

To achieve this, NBLL has adopted a SAFETY-FIRST approach toward all our activities.

We achieve a culture of safety through the following:

- **Safety discussions at all meetings**
- **Hosting an annual safety clinic**
- **Incident tracking and reporting**
- **A commitment to our Code of Conduct, including a zero-tolerance policy**



Emergency Phone Numbers

| | | |
|-------------------------------|--------------|----------------|
| League President: | John O'Dell | (425) 772-3572 |
| League VP Baseball: | Cody Lamens | (509) 750-8275 |
| League VP Softball: | Stacy Jordan | (425) 736-5770 |
| League Player Agent Baseball: | Ryan Cox | (206)605-0165 |
| League Player Agent Softball: | Susan Tait | (425) 985-5536 |
| League Safety Officer: | Niki Gerardi | (407) 690-0719 |
| Umpire-In-Chief Baseball:: | Ken Jager | (206) 356-8883 |

In case of emergency, call 911

Non-Emergency Police: 425-486-1254

Non-Emergency Fire: 425-486-1678



Safety Code for Little League

Every team should have a designated 'Safety Parent' to administer aid when needed. This Safety Parent must attend the NBLL Safety Clinic*

Managers, coaches and umpires should have some training in first aid. A fully equipped first aid kit should be available at the field.

No games or practices should be held when weather or field conditions are not good, particularly when lighting is inadequate.

Play area should be inspected frequently for holes, damage, glass and other foreign objects.

Dugouts and bat racks should be positioned behind screens.

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

Parents of players who wear glasses should be encouraged to provide "Safety Glasses".

Players must not wear watches, rings, pins, jewelry or other metallic items.

During sliding practice, bases should not be strapped down.

At no time should "horse play" be permitted on the playing field.

*Safety Parents who are actively licensed medical providers do not need to attend. Please report current training to safety@nbll.club

Catchers must wear a catcher's helmet, face mask and throat guard in warming up pitchers. This applies between innings and in bull pen practice. Skull caps are not permitted.

Procedure should be established for retrieving foul balls batted out of the playing area.

During practice sessions and games, all players should be alert and watching the batter on each pitch.

During warm up drills, players should be spaced so that no one is endangered by errant balls.

Equipment should be inspected regularly. Make sure it fits properly.

Pitching machines, if used, must be in good working order (including extension cords, outlets, etc.) and must be operated only by adult managers and coaches.

Batters must wear protective NOCSAE certified helmets during practice, as well as during games.

Catchers must wear a catcher's helmet (with face mask and throat guard), chest protector, and shin guards. Male catchers should wear long-model chest protector (divisions below Junior/Senior League) and hard cup at all times.

Except when a runner is returning to a base, head-first slides are not permitted.



Managers, Coaches, and Team Safety Parents' Responsibilities

- Have medical release forms present at all practices and games.
- Inspect equipment before each practice and game (See inspection guidelines)
- Inspect fields for hazards before each game or practice.
- Have First Aid Kits present at all practices and games.
- Have a cell phone available for use at all games and practices.
- Warm up your team with stretching exercises before practice and games.
- Take care of all minor injuries.
- Talk to the team and keep them aware of safety hazards on or off the field.
- Keep the First Aid kit fully stocked with supplies.
- To request first aid supplies or address any safety concerns, contact Niki Gerardi at safety@nbll.club or 407-690-0719.



Medical Release Form



7



Little League Baseball and Softball MEDICAL RELEASE



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

Player: _____ Date of Birth: _____ Gender (M/F): _____

Parent (s)/Guardian Name: _____ Relationship: _____

Parent (s)/Guardian Name: _____ Relationship: _____

Player's Address: _____ City: _____ State/Country: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Mobile Phone: _____

PARENT OR LEGAL GUARDIAN AUTHORIZATION: Email: _____

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

Family Physician: _____ Phone: _____

Address: _____ City: _____ State/Country: _____

Hospital Preference: _____

Parent Insurance Co: _____ Policy No.: _____ Group ID#: _____

League Insurance Co: _____ Policy No.: _____ League/Group ID#: _____

If parent(s)/legal guardian cannot be reached in case of emergency, contact:

| | | |
|------------|-------------|------------------------------|
| Name _____ | Phone _____ | Relationship to Player _____ |
| Name _____ | Phone _____ | Relationship to Player _____ |

Please list any allergies/medical problems, including those requiring maintenance medication. (i.e. Diabetic, Asthma, Seizure Disorder)

| Medical Diagnosis | Medication | Dosage | Frequency of Dosage |
|-------------------|------------|--------|---------------------|
| | | | |
| | | | |
| | | | |
| | | | |

Date of last Tetanus Toxoid Booster: _____

The purpose of the above listed information is to ensure that medical personnel have details of any medical problem which may interfere with or alter treatment.

Mr./Mrs./Ms. _____
Authorized Parent/Guardian Signature _____ Date: _____

FOR LEAGUE USE ONLY:

League Name: _____ League ID: _____

Division: _____ Team: _____ Date: _____

WARNING: PROTECTIVE EQUIPMENT CANNOT PREVENT ALL INJURIES A PLAYER MIGHT RECEIVE WHILE PARTICIPATING IN BASEBALL/SOFTBALL.
Little League does not limit participation in its activities on the basis of disability, race, color, creed, national origin, gender, sexual preference or religious preference.



*click on form to be directed to webpage

Be alert!

Check the field for safety hazards!

Wear proper equipment!

Safety is a team effort!

Always have your first aid kit!

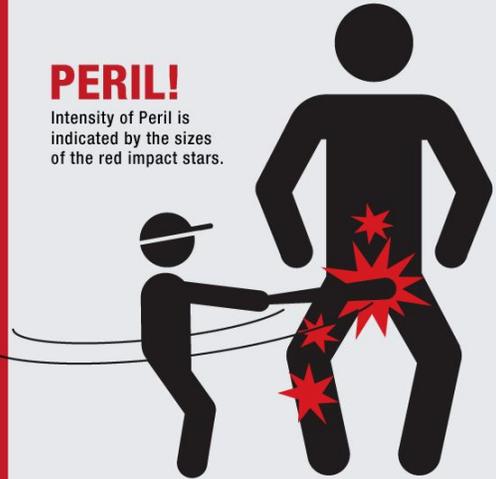
When in doubt, call for help!



CHILD SAFETY: PROTECT YOURSELF FROM YOUR CHILD AND CHILDREN!

WARNING:

PERIL!
Intensity of Peril is indicated by the sizes of the red impact stars.



WHEN TEACHING A TODDLER OR CHILD HOW TO SWING A BASEBALL BAT, BE AWARE OF YOUR OWN BODY'S "STRIKE ZONE." IT CAN EASILY BECOME A PERIL-ZONE.

howtobeadad.com 



Emergency Procedures

- Give first aid and **call 911 immediately**. If in doubt, always err on the side of caution and call 911.
- Notify parents immediately if they are not on the scene.
- Notify league Safety Officer by phone within 24 hours. [Niki Gerardi (407)-690-0719]
- Fill out a [North Bothell Little League Injury Report form](#) and send to safety@nbll.club within 24 hours.
- Talk to the team about the event and why the situation occurred and how it might have been prevented.
- North Bothell Little League insurance is supplemental to parents' own insurance policy. Claims must be filed with the League Safety Officer.
- Forms are available through the Little League Website <https://www.littleleague.org/forms-publications/#asap>
- REMEMBER: **Safety is everyone's job**. Prevention is the key to reducing accidents to a minimum.
 - Report all hazardous conditions to NBLL immediately.
 - Do not play on a field that is unsafe or use unsafe playing equipment.
 - Be sure your players are fully equipped at all times, especially catchers and batters.
 - **Check your team's equipment often!**



Communicable Disease Procedures



Communicable diseases are those passed from one person to another through bodily fluids, such as blood or saliva. This includes HIV, Hepatitis B, and several others. While the risk of one athlete infecting another is low, it is not non-existent. Procedures for reducing the potential for transmission of these infectious agents should include, but not be limited to the following:

- Before participating, all bleeding must be stopped. Open wounds must be covered. If an excessive amount of blood is on the uniform, it must be changed.

- Use gloves when dealing with any type of body fluid, including blood, saliva, or urine.



- Immediately wash hands after any contact with bodily fluids and/or after removing gloves.

- Clean all contaminated surfaces and equipment with an appropriate disinfectant before competition resumes. If an injury or incident occurs that produces a moderate to severe amount of bodily fluid in a place where others will be exposed (ie: on the field), play must stop until it can be properly cleaned.

- Practice proper disposal procedures. Moderately contaminated gloves and bandages should be placed in a sealed plastic bag prior to placing in the garbage. Any heavily contaminated (ie: blood or other fluids actively dripping from it) should be placed in a Biohazard bag. Special disposal is required. Both types of bags are provided in your NBL Little League First Aid Kit.

- Coaches with bleeding or oozing skin conditions should refrain from all direct athletic care until the condition is resolved.



First Aid Kit

- First-aid kits will be inspected and updated by league Safety Inspector prior to beginning of the season
- First-aid kits must be present at each game and practice
- Please call Niki Gerardi (407) 690-0719 with any questions or requests for additional supplies.
- Kits must be returned at the end of the season with the team gear.



First Aid Kit Supplies

| | | | |
|---|---------------------------------|----|-------------------------------|
| 1 | STAINLESS STEEL SCISSORS | 1 | ACETAMINOPHEN PACKET |
| 1 | TWEEZERS | 1 | IBUPROFEN PACKET |
| 2 | PAIR VINYL GLOVES | 15 | 3/8" X 1-1/2" BANDAGE |
| 3 | SAFETY PIN | 20 | 3/4" X 3" BANDAGE |
| 6 | COTTON TIPPED APPLICATOR | 3 | KNUCKLE BANDAGE |
| 1 | HAZARDOUS MATERIAL BAG | 3 | KNEE/ELBOW BANDAGE |
| 2 | GALLON SIZED ZIPLOCK BAGS | 10 | WOUND CLOSURE STRIP |
| 4 | WOOD FINGER SPLINT | 3 | 2" X 2" STERILE GAUZE PAD |
| 2 | POCKET-SIZE PACKAGES OF KLEENEX | 3 | 3" X 3" STERILE GAUZE PAD |
| 3 | SMALL INSTANT COLD PACK | 1 | EYE PAD |
| 6 | TRIPLE ANTIBIOTIC OINTMENT | 3 | 3" X 4" NON-ADHERENT DRESSING |
| 2 | HYDROCORTISONE CREAM | 1 | 2" CONFORMING GAUZE ROLL |
| 6 | ALCOHOL PREP PAD | 1 | 2" ELASTIC BANDAGE |
| 3 | IODINE PREP PAD | 1 | TRIANGLE BANDAGE |
| 3 | STING RELIEF PAD | 1 | CO-FLEX BANDAGE ROLL |
| 6 | ANTISEPTIC TOWELETTE | 1 | 1" ADHESIVE TAPE ROLL |
| | | 1 | STERILE SALINE EYE FLUSH |

To restock supplies, email safety@nbll.club



Equipment

- Coaches and Umpires should inspect all equipment before each use.
- The League President and Equipment Coordinator will inspect all equipment in the pre-season.
- Coaches will be required to walk/inspect the fields prior to practices and games. Umpires will also be required to walk the fields for hazards before each game.

Helmets:

- Must be N.O.C.S.A.E. approved and the approval seal must be visible.
- Must not be painted - this includes nail polish or white-out.
- Must have a **fully readable** exterior warning label that must be legible (Clear tape over the label will help).
- Must be inspected before each game or practice for cracks and proper padding.

Catcher's Gear:

- Must include a chest protector with neck collar (long model required in Little League baseball), shin guards, catcher's helmet, mask and throat protector at all times. Male players are highly encouraged to wear a protective cup when catching.

Shoes:

- No metal spikes or cleats are permitted. Rubber or molded plastic soles are acceptable (**Junior, Senior and Big League players may wear metal cleats**).

Bats:

- Must be inspected before each game or practice for dents, cracks, and flat spots.
- No altered bats, this includes painted or engraved bats.
- **Baseball** - All bats must be USA. USSSA bats are NOT allowed.
 - **Tee Ball** – No more than 26" in length and text which reads "ONLY FOR USE WITH APPROVED TEE BALLS"
 - **Little League Baseball** - No more than 33 in. in length, not more than 2 5/8" in diameter.
 - **Junior and Senior Baseball** - No more than 34 in. in length, not more than 2 5/8" in diameter.
 - **Little League and Senior Softball** - Same dimensions as Little League baseball and Senior League baseball.
- **Softball**
 - The bat shall be no more than 33 inches (34 inches for Junior/Senior League) in length, not more than two and one-quarter (2¼) inches in diameter, and if wood, not less than fifteen-sixteenth (15/16) inches in diameter (7/8 inch for bats less than 30 inches) at its smallest part. Non-wood bats shall be printed with a BPF (bat performance factor) of 1.20.

More info about bats can be found here:

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

Male Players:

- It is highly recommended that **all** male players wear a protective cup once they begin player pitch (AAA and above.)



First Aid Training/Safety Clinic

March 11, 2026 | 6:30– 9:30 pm | Skyview Middle School Library

- Mandatory training
- Each team must send at least one person. This can be the coach, assistant coach, or designated safety parent.

*If your team safety parent is an actively licensed medical provider, they do not need to attend, though we still recommend it. Please contact safety@nbll.club to confirm this requirement has been met.



The Heimlich Maneuver

The Heimlich Maneuver

The Heimlich maneuver is an emergency method of removing food or foreign objects from the airway to prevent suffocation

When approaching a choking person, one who is still conscious, ask, "Can you cough? Can you speak?"

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

*If they cannot speak or cough, **CALL 911**. Then proceed.*

To Perform the Heimlich Maneuver:

- Grasp the choking person from behind;
- Place a fist, thumb side in, just below the person's breastbone (sternum), but above the naval;
- Wrap second hand firmly over this fist; and
- Pull the fist firmly and abruptly into the top of the stomach.
- *It is important to keep the fist below the chest bones and above the naval (belly button).*
- *The procedure should be repeated until the airway is free from obstruction or until the person who is choking loses consciousness (goes limp). These will be violent thrusts, as many times as it takes.*

For a Child:

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

Most individuals are fine after the object is removed from the airway. However, occasionally the object will go into one of the lungs. If there is a possibility that the foreign object was not expelled, medical care should be sought.

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



CONCUSSION FACT SHEET FOR PARENTS



WHAT IS A CONCUSSION?

A concussion is a type of traumatic brain injury. Concussions are caused by a bump or blow to the head. Even a "ding," "getting your bell rung," or what seems to be a mild bump or blow to the head can be serious.

You can't see a concussion. Signs and symptoms of concussion can show up right after the injury or may not appear or be noticed until days or weeks after the injury. If your child reports any symptoms of concussion, or if you notice the symptoms yourself, seek medical attention right away.

WHAT ARE THE SIGNS AND SYMPTOMS OF CONCUSSION?

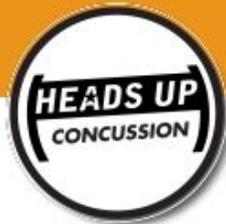
If your child has experienced a bump or blow to the head during a game or practice, look for any of the following signs of a concussion:

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"

SIGNS OBSERVED BY PARENTS/ GUARDIANS:

- 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



DANGER SIGNS

Be alert for symptoms that worsen over time. Your child or teen should be seen in an emergency department right away if s/he has:

- One pupil (the black part in the middle of the eye) larger than the other
- Drowsiness or cannot be awakened
- A headache that gets worse and does not go away
- Weakness, numbness, or decreased coordination
- Repeated vomiting or nausea
- Slurred speech
- Convulsions or seizures
- Difficulty recognizing people or places
- Increasing confusion, restlessness, or agitation
- Unusual behavior
- Loss of consciousness (even a brief loss of consciousness should be taken seriously)

WHAT SHOULD YOU DO IF YOU THINK YOUR CHILD HAS A CONCUSSION?

1. SEEK MEDICAL ATTENTION RIGHT AWAY

A health care professional will be able to decide how serious the concussion is and when it is safe for your child to return to regular activities, including sports.

2. KEEP YOUR CHILD OUT OF PLAY.

Concussions take time to heal. Don't let your child return to play the day of the injury and until a health care professional says it's OK. Children who return to play too soon - while the brain is still healing - risk a greater chance of having a second concussion. Repeat or later concussions can be very serious. They can cause permanent brain damage, affecting your child for a lifetime.

3. TELL YOUR CHILD'S COACH ABOUT ANY PREVIOUS CONCUSSION.

Coaches should know if your child had a previous concussion. Your child's coach may not know about a concussion your child received in another sport or activity unless you tell the coach.

HOW CAN YOU HELP YOUR CHILD PREVENT A CONCUSSION OR OTHER SERIOUS BRAIN INJURY?

- Ensure that they follow their coach's rules for safety and the rules of the sport.
- Encourage them to practice good sportsmanship at all times.
- Make sure they wear the right protective equipment for their activity. Protective equipment should fit properly and be well maintained.
- Wearing a helmet is a must to reduce the risk of a serious brain injury or skull fracture.
 - However, helmets are not designed to prevent concussions. There is no "concussion-proof" helmet. So, even with a helmet, it is important for kids and teens to avoid hits to the head.

HOW CAN I HELP MY CHILD RETURN TO SCHOOL SAFELY AFTER A CONCUSSION?

Children and teens who return to school after a concussion may need to:

- Take rest breaks as needed
- Spend fewer hours at school
- Be given more time to take tests or complete assignments
- Receive help with schoolwork
- Reduce time spent reading, writing, or on the computer

Talk with your child's teachers, school nurse, coach, speech-language pathologist, or counselor about your child's concussion and symptoms. As your child's symptoms decrease, the extra help or support can be removed gradually.



Warm-Up Exercises

Players should warm up before they play at home, at a practice, or before a game. Start every practice or game with a team warm-up routine so that players build the habit at an early age. The warm-up should not last longer than 8 to 10 minutes. As a team, jog out to the outfield and form a circle for the exercises. Once you have taught the team the series of exercises, have each player take on a leadership role by leading one of the exercises during the team warm-up. Below are a list of Warm up exercises:

1. JUMPING JACKS

- Start with feet together, hands at side, legs slightly flexed
- On first jump, hands go above the head and feet wide apart
- On 2nd jump, return to beginning position repeat without stopping 10 to 20 times

2. TOE TOUCHES

- Feet wide apart, legs slightly flexed, upper body bent over with eyes looking at ground
- Arms straight out from shoulders
- Keeping head still, rotate arms to one up and one down position
- Repeat 20 to 30 times

3. SPIDER PUSH UPS

- Feet wide apart standing in upright position
- On command, players walk out on hands to pushup position, do 1 pushup and walk back to standing position without moving feet
- 2nd time out do 2 pushups, then three, etc.
- 11 to 12 year olds could go out 5 times

4. ARM CIRCLES

- Feet comfortably apart, begin to rotate arms forward with no bend in the elbows, then rotate them backward
- 10 to 15 each way
- For fun, try rotating one arm each way

5. ELBOW PULLS

- Bring one elbow in front of neck with hand on opposite shoulder
- Take free hand, grab behind the elbow and pull for 5 second count
- 3 times each way for 5 second count

6. ELEPHANT STRETCH

- Feet comfortably apart, lock hands out front with reversed grip
- Stretch arms and hands over and behind the head, if possible, and squeeze elbows together
- Then lean side to side at the waist for a full body stretch
- Repeat 4-5 times



Warm-Up Exercises Cont..

7. FLAMINGO STAND

- Stand on one foot and grab your other foot with either hand
- When in the proper stretch, the knee of the bent leg will point to the ground
- 3 times each way holding for a 5 second count

8. LIGHT BULB TURN

- Standing on tiptoes and stretching as high as possible with one arm
- Use a turning in and out motion 10 times each way
- Work both arms

9. ROCKING SIT-UPS

- From a sitting position, rock back on your shoulders and bring knees up to the chest
- In one continuous motion, rock back to a sitting position and straddle your legs
- Pivot at the waist doing a toe touch each way
- Repeat at least 10 times

10. MOUNTAIN CLIMBING

- Move to a push-up position with thumbs touching and stretch one leg straight back, the other is bent and both are on the ball of the foot
- Point the bent knee outside the same side elbow
- On the command "switch", reverse positions of the legs
- After 4 switches, repeat 10 times without, stopping

11. CORKSCREW TWIST

- While sitting with outstretched legs, lift one leg and place it on the opposite side of the other knee
- Hook with the opposite side elbow putting pressure on the bent knee and turn your body to face backwards
- Place the other hand behind you for balance
- Do 3 times to each side, holding for a 5 second count

12. MUSCLE BEACH

- Lock your hands together over your head
- Feet wide, squat down by bending your legs
- Pull your arms to one side and then the other
- Start facing forward, then turn to face right and left
- Have fun flexing your muscles as you warm up



Volunteer Code of Conduct

The Board of Directors of North Bothell Little League has mandated the following Code of Conduct for all Volunteers and Spectators. By signing up to volunteer, you have agreed to abide by this code of conduct.

No board member, manager, coach, volunteer, player or spectator shall at any time:

- Speak disrespectfully to any manager, coach, official or representative of the league.
- Be guilty of a physical attack upon any board member, official manager, coach, player or spectator.
- Be guilty of heaping personal verbal or physical abuse upon any official for any real or imaginary belief of a wrong decision or judgment
- Challenge an umpire's authority. The umpires shall have the authority and discretion during a game to penalize the offender according to the infraction, up to and including expulsion from the game.
- Be guilty of using unnecessarily rough tactics against the body of an opposing player in the play of a game
- Be guilty of an objectionable demonstration of dissent at an official's decision by the throwing of gloves, helmets, hats, bats, balls or any other forceful unsportsmanship-like action
- Be guilty of the use of profane, obscene, or vulgar language in any manner at any time.



Volunteer Code of Conduct Continued

- Appear on the field of play, stands or anywhere on the NBLL complex or fields while in an intoxicated state. Intoxicated will be defined as an odor or behavior issues
- Be guilty of gambling upon any play or outcome of any game with anyone at any time
- No Smoking or Vaping while in the stands or on the playing field or in any dugout. Smoking or Vaping will only be permitted in designated areas which will be twenty (20) feet from any spectator stands or dugout
- Be guilty of publicly discussing with spectators in a derogatory or abusive manner any play, decision or personal opinion on any players during the game
- As a manager or coach, be guilty of mingling with or fraternizing with spectators during the course of the game
- Be guilty of tampering or manipulating any league rosters, schedules, draft positions or selections, official score books, rankings, financial records or procedures

The Board of Directors will review all violations of the NBLL Code of Conduct. The person involved in any violations may be immediately removed from the field by a Manager, Umpire or Board Member and may be suspended from attending any practices or games till the investigation is complete. Depending on the seriousness or frequency, the board may assess additional disciplinary action up to and including expulsion from the league.

