Babe Ruth League, Inc. Tournament Team Checklist

PLACE THIS COMPLETED CHECKLIST IN THE FRONT OF THE TOURNAMENT BOOK. PLAYER DOCUMENTS MUST BE IN ALPHABETICAL ORDER TO MATCH THE TOURNAMENT ROSTER.

League:								Prep date:					
Team:							_		Prepared by:				
Age Group:	Baseball:	4-6	7-8	9	10	11	12	13	14	13-16	16-18		
	Softball:	6U	8U	10U	120	IJ	14U	16U	18U	l			
Check-off	Item												
	THESE DOCUMENTS ARE REQUIRED AT THE BEGINNING OF ALL TOURNAMENTS. This Tournament Team Checklist Signed Manager Conduct Certification Copy of Certificate of Group Accident Insurance coverage												
	Copy of Certificate of Commercial General Liability Insurance coverage												
	Copy of the Online Tournament Team Roster Form signed by League President Copy of League Letter of Eligibility ORIGINAL of Consent for Treatment Form completed for each player Copy of the Online Tournament Team Photograph with players and coaches identified Copy of Coaching ID card or Coaching Education certificate for each manager and coach on the roster Proof of Abuse Prevention Training (if not indicated on the official roster)												
	NOTE: IF				•	/E I	PARI	ENTS	GAT	E PAS	S FUNDS AVAILABLE AT	1	
For Tournar	nent Officia	l's Us	e Only	,									
Approved:	Yes	No								[Date:		
Checked by	:Signature:												
	Name (print):												
	Babe Ruth	positi	ion:	_									
Remarks:													