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:									Pr	epared l	oy:		944	
Age Group:	Baseball:	4-6	7-8	9	10	11	12	13	14	13-16	16-18			
	Softball:	6U	8U	10U	12U	14	U	16U	18U					
Check-off	Item		- wet	**********									desire i regulario de	
	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													
(<u> </u>	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 APPLICABLE, HAVE PARENTS GATE PASS FUNDS AVAILABLE AT TOURNAMENT CHECK-IN.													
For Tournament Official's Use Only														
Approved:	Yes	_ No								D	ate:			
Checked by: Signature:														
	Name (print):													
	Babe Ruth	positio	on:							***************************************	-			
Remarks:		- 41		- No.										
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