

**Babe Ruth League, Inc.
Tournament Team Checklist**

Please place the completed checklist in front of your team book.....

League: _____ Prep Date: _____

Team: _____ Prepared By: _____

Age Group: **Baseball** 4-6 7-8 9 10 11 12 13 14 13-15 16-18
Softball 6U 8U 10U 12U 14U 16U 18U

Check-off Item

THESE DOCUMENTS ARE REQUIRED AT THE BEGINNING OF ALL TOURNAMENTS

- _____ This Tournament Team Checklist.

- _____ Birth Documents or Records as Specified: Birth Certificate from State, County or City Bureau of Vital Statistics, Department of Health Affidavits of Birth, Baptismal Certificates, Hospital Certificates, School Certificates; Record of Notification of Birth, Registration by the Bureau of Census of the United States Department of Commerce, official laminated Babe Ruth ID card, or Babe Ruth League, Inc. Letter of Waiver.
Note: Notarized photocopies of the original birth certificates are not allowed.

- _____ Copy of Certificate of Group Accident Insurance coverage

- _____ Copy of Certificate of Commercial General Liability Insurance coverage

- _____ League copy of the Original Tournament Team Roster Form *(plus four copies)*

- _____ Copy of League Letter of Eligibility

- _____ Two **ORIGINALS** of Consent for Treatment Form completed for each player

- _____ 5 x 7 or 8 x 10 color or black & white glossy team photograph with players and coaches identified **(four at the District level; three at the State level; two at the Region level)**

- _____ Copy of Certificate of Coach Certification for each manager/coach on the roster

For Tournament Officials Use Only

Checked by: _____ Date: _____

Approved: Yes ____ No ____

Remarks: _____
