

New York State
SOFTBALL OFFICIALS
Organization, Inc.



President
James Berkery
20 Mass Ave
Cohoes, NY 12047
Phone/Fax 518-237-6682
JRberkery@aol.com

Vice President
Brad White
60 Spring Street
Goshen, NY 10924
914-960-9344
Bradford.h.white@gmail.com

Secretary
Lynne Nemeth
329 Roe Avenue
Elmira, NY 14901
607-259-2062
lnemeth@stny.rr.com

Treasurer
Dick James
209 Castle Creek Rd.
Binghamton, NY 13901
607-648-4227
rjames14@stny.rr.com

LIABILITY ALERT FORM

Umpire Reporting: _____ Chapter: _____

Name of Partner: _____ Date of Game: _____

Site: _____ Teams: _____ vs. _____

Level of Play (circle one): MODIFIED JUNIOR VARSITY VARSITY SUMMER LEAGUE

Weather Conditions: _____

Condition of Field: _____

Name or number of Injured Player: _____ Team: _____

Describe what occurred: _____

Submit this form to the VICE PRESIDENT of NYSSO (address above) within 72 hours of the game in which a player was carried off the field and/or left by an ambulance. **Also, keep a copy for your records and give a copy to the designated person on your board for the boards' records.**

Section: _____ Chapter: _____ Date of Report: _____

Below to be filled out by state V.P.

Date Received: _____ Date Filed: _____

Affiliated with N.Y.S.P.H.S.A.A., Inc.