



Society for American Baseball Research Baseball Reminiscence Chartered Community

www.sabrbaseballmemories.org

BASEBALL MEMORIES PLAY BOOK

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CHAPTER ONE - BACKGROUND

1a - INTRODUCTION

Reminiscence (recalling pleasant memories of the past) is an effective intervention to help improve the quality-of-life for people dealing with Alzheimer's, dementia, chronic health issues, and loneliness. Since 2015, members of the Society for American Baseball Research (SABR) have been developing and delivering baseball reminiscence programs in partnership with chapters of the Alzheimer's Association, Veterans Administration facilities, and local senior/memory care organizations.

These reminiscence programs are not only effective in helping improve the well-being of participants, but they are also very rewarding for volunteers. This document contains information to help implement and operate baseball reminiscence programs in your community. Beyond the resources available here, we're also personally ready and willing to assist you. You can contact any of us for more information, advice, and help:

Jon Leonoudakis (chair) (California) – jbleonoudakis@me.com

George Sommerfeld (New York, Connecticut, New Jersey) - allbcoop@yahoo.com

Monte Cely (Texas) – <u>cely@swbell.net</u>

1b - BRIEF HISTORY OF SPORTS REMINISCENCE PROGRAMS

Reminiscence therapy has been widely adopted using topics such as music, art, crafts, history and media as subjects to promote engagement and discussion about pleasant memories of the past. During the past two decades, volunteers in Scotland have explored and implemented sports reminiscence programs. Beginning with football (soccer), these programs have been highly successful and have expanded to other popular sports such as golf, rugby, and shinty (a Celtic form of field hockey). These programs were especially effective in attracting and serving more male participants. Currently there are over 250 sports reminiscence programs nation-wide in Scotland.

In 2011, an experimental baseball reminiscence program was launched in St. Louis. This program adapted the Scottish model for use with baseball as the primary topic for discussion. The program was a cooperative effort among the Veteran's Administration, the Alzheimer's Association, St. Louis University, St. Louis Cardinals and the Cardinals Museum. Focused mostly on St. Louis Cardinals baseball, programs were based at Busch Stadium, the local VA Medical Center, and at local nursing homes.

In 2015, members of the Society for American Baseball Research (SABR) in the Austin, Texas metro began a baseball reminiscence program in cooperation with Alzheimer's Texas. This program – initially called "BasebALZ" but also referred to as "Talking Baseball" and "The Baseball Guys" - adapted the St. Louis Cardinals model for use in a city without a major league team. This program was highly successful

and has since expanded to the Veterans Administration Hospital in Kerrville, Texas; to Georgetown, Texas; and to San Antonio. Jim Kenton is the local SABR leader of these efforts.

In 2018, SABR members in Los Angeles adopted the BasebALZ model and adapted it for use in Southern California. This program was developed in partnership with Alzheimer's Los Angeles; it has been equally successful, and has since expanded to a Veteran's Administration home, as well as to San Diego in partnership with Alzheimer's San Diego. Jon Leonoudakis is the local SABR lead.

Concurrently, SABR member George Sommerfeld was offering baseball-focused programs at senior centers in Westchester County, N.Y. This program, "The Baseball Hour", was then adapted to also focus on participants living with dementia.

All of these U.S.-based baseball reminiscence efforts have been highly successful. Feedback from sponsors, local administrators, participants, caregivers, and volunteers has been overwhelmingly positive.

Based upon this track record of success, in 2020 the Board of Directors of the Society for American Baseball Research endorsed the creation of a Baseball Reminiscence chartered community. Volunteer members of this community are working to promote baseball reminiscence programming nationally.

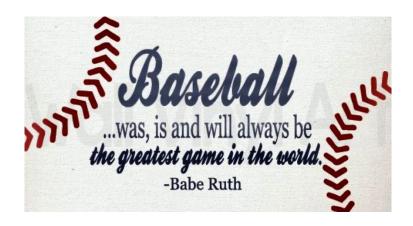
Join us to help expand this valuable and rewarding community service initiative!

1c - THE BASEBALL MEMORIES PLAY BOOK

The goal of the **Baseball Memories Play Book** is to provide a consolidated document containing resources and guidance to enable the planning, development, and delivery of baseball reminiscence programs in your community. The Play Book consists of the following chapters:

GOOD TO KNOW
GETTING STARTED
PLAN THE PROGRAM
DELIVER THE PROGRAM

These resources have been developed and successfully used by the current baseball reminiscence programs in the United States. We sincerely hope they will be useful to you as you embark on this exciting and rewarding journey.



CHAPTER TWO - GOOD TO KNOW

Baseball reminiscence programs usually serve two broad social groups: those living with Alzheimer's and other forms of dementia; and those dealing with isolation, loneliness, and depression. In serving these groups of participants, we also help to serve and support their caregivers.

This chapter will provide overview information about people living with these issues.

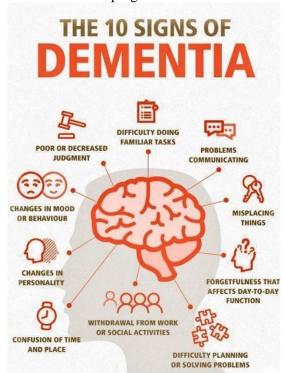
2a - DEMENTIA AND ALZHEIMER'S

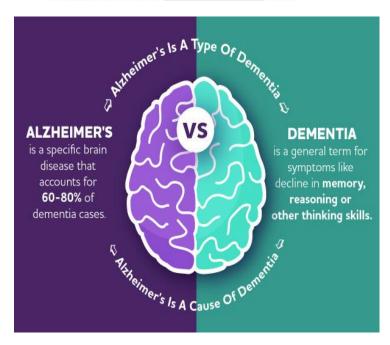
The impact of Alzheimer's in the United States is huge. Here are a few facts and figures:

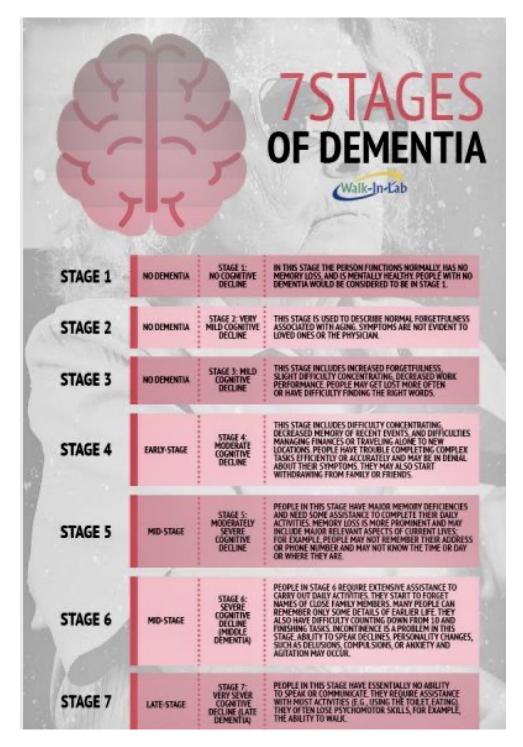
Alzheimer's in the United States

- Alzheimer's is the 6th leading cause of death in the United States.
- Alzheimer's is the only disease in the 10 leading causes
 of deaths in the United States that cannot be cured,
 prevented or slowed.
- 1 in 10 Americans over the age of 65 has Alzheimer's.
- Between 2017 and 2025 every state is expected to see at least a 14% rise in the prevalence of Alzheimer's.
- There was an 89% increase in deaths due to Alzheimer's between 2000 and 2014.
- More than 5 million Americans are living with Alzheimer's.
- By 2050, it's estimated there will be as many as 16 million Americans living with Alzheimer's.
- Every 66 seconds someone in the United States develops Alzheimer's.
- 1 in 3 seniors dies with some form of dementia.
- When the first wave of baby boomers reaches age 85 (in 2031), it is projected that more than 3 million people age 85 and older will have Alzheimer's.
- One-third of Americans over age 85 are afflicted with the illness.
- Typical life expectancy after an Alzheimer's diagnosis is 4-to-8 years.
- By 2025, the number of people aged 65 and older with Alzheimer's disease is expected to reach 7.1 million people, a 27% increase from the 5.6 million age 65 and older in 2019.
- By 2050, there could be as many as 7 million people age
 85 and older with Alzheimer's disease, accounting for half (51%) of all people 65 and older with Alzheimer's.
- Proportion of People With Alzheimer's Disease in the United States by Age: 85+ years 38%, 75-84 years, 44%, 65-74 years, 15%, <65 years, 4%

Here's what dementia looks like, the relationship between Alzheimer's and dementia, and how the disease progresses:







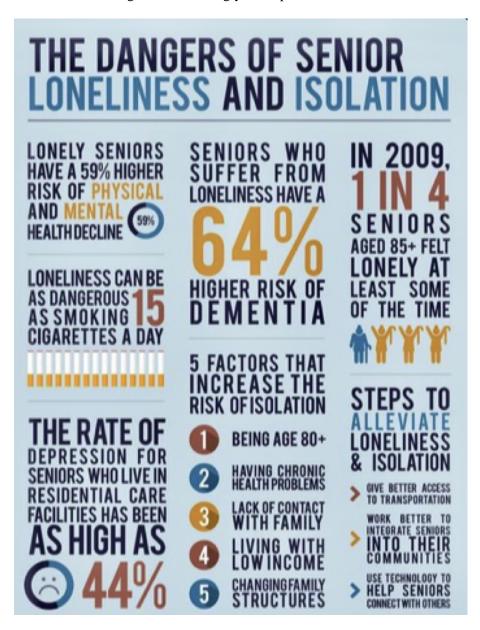
Generally, Alzheimer's participants in baseball reminiscence programs are at STAGE 4 (early-stage) or STAGE 5 (moderate mid-stage). As they progress thru STAGE 6 (severe mid-stage), their caregiver will often re-evaluate their involvement and may decide to cease participation. Although reaching this point is sad for everyone involved, it's unfortunately the natural progression of the disease.

An **Alzheimer's Texas training course**, covering some of the above considerations and that was part of initial training received by SABR volunteers in Austin, Texas, is <u>on our web site here</u>.

2b – ISOLATION, LONELINESS, and DEPRESSION

Baseball reminiscence programs were initially targeted towards those living with dementia and specifically with Alzheimer's. However, these programs have also been effective in helping improve the quality-of-life for those dealing with isolation and loneliness (including those who have been institutionalized), and depression.

America is suffering from increasingly widespread loneliness. Here are a few facts and figures:



As isolation and loneliness are often correlated with depression, the effects of depression can be similar or even more pronounced.

In discussing the issues of isolation and loneliness at a recent SABR Baseball Reminiscence group conference call, George Sommerfeld had this to say:

"... In addition to those who have onset dementia and Alzheimer's 'America is suffering an epidemic of loneliness' said Arthur Brooks, president of The American Enterprise Institute in 2018.

"Others have similar messages. Health columnist Jane Brody wrote 'Social interaction is a critically important contributor to good health and longevity', New York Times' Nicholas Kristof wrote 'Isolation isn't just depressing. It can be deadly'. A Wall Street Journal article comment made more than a year before the start of the 2020 pandemic pointed out that, 'Baby boomers are aging alone more than any other generation in U.S. history and the resulting loneliness is a looming public health threat.'

"The goal is to facilitate conversation so that the participants are actively involved in expressing their opinions. Researcher and explorer Dan Buettner in his book <u>Thrive: Finding Happiness the Blue Zones Way</u> said easy camaraderie is all that's needed. There is a need for a club or social group and that the anticipation and the meeting with people just once a month can give a person meaningful happiness.

"For those who enjoy baseball, starting a conversation about the game should not be difficult. Baseball subjects arise all year round e.g. the decision by the management of the Cleveland Indians to change their nickname, the meaning and effect of words and the recognition of the Negro Leagues by MLB.

"While we look for places serving those with onset dementia and Alzheimer's, we should keep in mind that there are people, including caregivers, of all ages who have a need for social interaction and intelligent conversation who can also benefit from what all of us can provide."

2c - IMPLICATIONS FOR CAREGIVERS AND THEIR IMPORTANCE

It's important to understand the role of caregivers, their importance to the well-being of a person living with dementia or depression, and the key role they play within the context of a baseball reminiscence program.

Caregiving is a challenging job. As recently as 2019, it's reported that over 16 million caregivers in the U.S. expend over 18 billion hours a year in caring for family, friends, and loved ones living with dementia. 59% of these caregivers report high-to-very-high levels of emotional stress, often leading to increased levels of depression and isolation for themselves.

Caregivers can and do benefit from baseball reminiscence programs, as well as help their partner get the most from our programs. It's important to consider the caregiver in the planning and delivery of baseball reminiscence programs.

A brief summary document entitled THE ROLE OF CAREGIVERS is available on our web site here

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CHAPTER THREE – GETTING STARTED

There are three key requirements for a successful baseball reminiscence program. These are:

A motivated **team leader**

An engaged partner organization

A team of **volunteers**

We'll discuss each of these in turn in this chapter, and provide some guidance and resources to help recruit these key human resources.

3a. TEAM LEADER

Identifying a team leader is crucial to the success of any baseball reminiscence program. The leader can wear many hats, including recruiting partner organizations, recruiting and organizing volunteers, planning program sessions, and may even facilitate those sessions live. Often the team leader has had first-hand experiences with close relatives or friends that have lived with dementia, loneliness, or depression.

In some cases, the team leader may be the sole volunteer – either initially or long-term. One person can certainly make a difference – so if circumstances dictate, the leader could choose to move forward alone.

As with any human endeavor involving multiple people and groups, a motivated, committed, and organized leader is critical to success.

3b. PARTNER ORGANIZATIONS

Baseball reminiscence programs partner with key organizations to reach participants (and their caregivers) living with Alzheimer's and dementia, or dealing with isolation, loneliness, or depression. Potential partner organizations are those that provide services to these seniors, or are responsible for some part of their overall care.

Some potential partner organizations are:

The **Alzheimer's Association** – local chapters may be affiliates of the national organization, or independent non-profit service organizations.

The **Veteran's Affairs Administration** – administrators at local hospitals or VA homes can be good advocates.

The **Memory Café Network** – an international directory of local sites that host gatherings for people living with dementia.

The American Association of Retired Persons – AARP has a broad array of services for seniors.

Local organizations such as community centers, senior centers, senior day care centers, senior living communities, nursing homes, and places of worship.

We should stress that, as a general rule, we've had the most success with local organizations. Start with a local contact first – they'll be more attune to the local environment and programmatic needs, and usually will have more "freedom to act". Starting at the top of a national organization is often a longer and sometimes more frustrating experience.

Additional information about potential partners is available on our web site here

In general, the partner organization will be responsible for bringing participants and caregivers into the program. They will also usually host the program at their facilities (or arrange for hosting) and deal with other logistics such as technology infrastructure, etc.

An enthusiastic, engaged partner organization is critical to the success of a baseball reminiscence program. Often, a key program manager at the partner group will embrace the program and this will provide a sound basis for success.

A sample/generic **introductory letter** that can be used to introduce baseball reminiscence to a prospective partner is <u>on our web site here</u>. This is an MSWord document that can be downloaded and edited to meet local needs.

We also have a number of reference letters, testimonials, and promotional videos from current key partners that may be of use in recruiting partner organizations. They can be found at www.sabrbaseballmemories.org/testimonials.

3c. VOLUNTEERS

Experiences to date tell us that volunteering for a baseball reminiscence program is a very rewarding experience. Many volunteers have personal histories of friends and loved ones living with Alzheimer's, dementia, or depression. Volunteers express satisfaction that baseball reminiscence sessions provide a valuable service to seniors and therefore to the community at large. Volunteer retention is high.



Not only is volunteering to support a baseball reminiscence program a rewarding experience, but it's good for you! A few survey results are at left.

So how to you get some volunteers? Don't be afraid to just ask! One-on-one discussion between the team leader (or current volunteers) and a prospective volunteer is often the best approach.

Volunteers can be recruited from the local SABR chapter, from the partner organization's existing volunteers, and from friends/family.

Be specific about expectations:
Frequency of meetings
Types of contributions expected
Punctuality

Stress the many benefits of volunteering.

Some further thoughts on the characteristics of a good baseball reminiscence volunteer are on our web site here.

CHAPTER FOUR - PLAN THE PROGRAM

In this section, we'll discuss how to go about planning a baseball reminiscence program for eventual delivery in your community.

4a. JOINT PLANNING WITH PARTNER ORGANIZATION

Much of the early planning work will be done in close cooperation with your partner/host organization. It's important to understand the partner's goals and expectations, and how a baseball reminiscence program will fit into their portfolio of services and help to support their mission.

It's important to define roles and responsibilities. In general,

The Partner (for example, a local Alzheimer's chapter or senior center) will:

"Market" the program – advertise the program via media and their online presence.

Evaluate and screen participants to both ensure suitability and interest in the program, and to learn more about their particular interests (for example, favorite teams, favorite players, etc). Caregiver involvement should be encouraged, and an assessment should be made if caregiver attendance should be mandatory for certain participants.

Provide any required or desirable training for the volunteer group.

A representative training session given to SABR volunteers by Alzheimer's Texas is here.

Provide or otherwise arrange for a meeting location (in person) or technology platform (online). In some instances, the Sponsor may not have suitable facilities at their offices. In that case, the Sponsor should arrange for a Host site at a partner facility (perhaps a senior living center, senior day care center, etc.).

The SABR Leader and Volunteer Team will:

Develop content for all meetings, concentrating on areas of interest to the local participants and caregivers, as well as the baseball history of the local community.

Conduct all program sessions, with sufficient volunteers to effectively engage all the participants and their caregivers.

Provide ongoing feedback to key Partner Organization contacts.

A useful Case Study written by volunteers in Texas is here.

4b. SCHEDULING

Experience has shown that a planned – forward looking and consistent - approach to scheduling, coupled with a familiar, consistent program agenda, will greatly help to raise the comfort level of participants and their caregivers. Some scheduling items to consider:

How often will the program be offered? Most current baseball reminiscence programs are offered either monthly or bi-weekly.

What day-of-week and time-of-day should the programs be held? These should be consistent monthin and month-out – for example – every other Monday at 11 am; or the second Wednesday of the month. In planning day/time, be aware of the "Sundowning Effect" - a symptom of dementia also called "late-day confusion". The participant may exhibit increased levels of confusion and agitation as the day goes on. As these symptoms are usually less pronounced earlier in the day, it's best to schedule reminiscence programs for late morning-lunchtime. If lunch can be included, that provides additional respite for the caregiver. It's also recommended to schedule earlier, rather than later in the week.

Online, in-person, or both? Originally, all baseball reminiscence programs were delivered in-person in a group meeting setting. With the advent of the 2020-21 Covid-19 pandemic, reminiscence programming has been moving online, but still as an interactive group-oriented session. A determination should be made between the Partner and SABR as to the preferred approach moving forward.

4c. AGENDAS

As with scheduling, a consistent/familiar program agenda and content will help promote success.

In general, an **agenda should include some or all of the following components**:

Allow for social time before and after the agenda. This provides additional opportunities to get to know everyone involved, enjoy each others' company, and put everyone at ease.

Greetings, housekeeping items (locations of restrooms, etc.) and any necessary introductions.

One or more baseball topics. These can reflect a certain "theme" for that meeting, or an ongoing theme spread across multiple meetings.

One or more related topics of general interest. These can be tailored to meet caregiver interests, as well as non-baseball interests of participants. Be alert for clues to what these topics might be. For example – related to a discussion of the 1960 World Series, you might discuss hit songs of 1960.

Singing. Music is an effective form of reminiscence therapy. Include "Take Me Out to the Ballgame", "Star-Spangled Banner", "God Bless America" and other music/singing as appropriate.

Mild physical activity. Can be as simple as getting up and doing the "wave", or the "chicken dance". Throwing or hitting a whiffle ball. Staging a twist contest (complete with a Chubby Checker rendition). Be creative!

Other popular activities – a game of baseball bingo or bean-bag baseball are possibilities.

Participant/caregiver presentations – look for opportunities for participants and caregivers to contribute to the agenda. An example is that a couple in Texas had a regular agenda item called "Stump the Experts", where they researched clues about a ballplayer to see if the volunteers could guess the identity. They routinely did stump the volunteers.

Also find ways to engage all the senses. Some examples are:

Tactile – provide baseballs or sets of old baseball cards.

Bring in ball gloves and oil them.

Use a bat for demonstrations of "who chooses first", "who bats first"

Smell – pop some popcorn or have some ballpark food for lunch (if provided).

Sounds – popular music and baseball broadcast radio clips.

Visual – use pictures and videos to enhance baseball discussions, as well as other topics.

Some example schedules and agendas are on our website here.

Still more examples are on the Texas website here.

4d. CONTENT

There are many sources for useful and relevant content that will enhance baseball reminiscence programming. Here are some suggestions and resources:

Memorabilia – always popular with baseball fans. Ask participants and caregivers to bring a favorite baseball item; volunteers can do likewise. An example would be – if a topic for the next session is "The Evolution of the Baseball Glove", ask everyone to bring their glove(s) to the meeting. Other cherished baseball items would be great props to get participants to tell their own baseball stories.

The ongoing evolution of internet capabilities and popular web sites makes digital media easy to locate. This media is great for baseball reminiscence content. Here are a few examples of useful content sources.

Pictures

It's easy to find pictures of a player, team, ballpark, etc. using any of the popular search engines. For instance, you can go to $\underline{www.google.com}$, enter a player's name, get the search results and then click on "Images".

SABR has guidance on sources for images: https://sabr.org/how-to/sources-for-images

An extensive catalog of image libraries is here.

Audios/Videos

YouTube is a great source for baseball audio and video content. Go to www.youtube.com and enter a ballgame, World Series, or other event to see what's available.

An extensive collection of classic baseball radio broadcasts is here.

MLB recently unveiled a video archive, with numerous searchable criteria. It's called the MLB Film room and is here.

You can also search Google for other audio and video archives.

Music

YouTube is the best source for music content – go to $\underline{www.youtube.com}$, click on Music and then search.

Archive of Baseball Reminiscence Schedules, Agendas, and Presentations

There is an extensive collection of schedules, agendas, and presentations on SABR's <u>Texas</u> <u>Resources page</u>. These are available for download for your use or customization, as well as to give volunteers some examples of topics for program presentations.



CHAPTER FIVE - DELIVER THE PROGRAM

5a. BEFORE THE FIRST SESSION

Extra care and close coordination with the Sponsor Organization should go into the agenda and logistics for the first session. You'll want things to go smoothly and make a great first impression on those in attendance. Some items to consider:

Go over the first-session agenda in detail and in advance with the Sponsor. Place special emphasis on introductions and getting to know the participants and caregivers.

Based upon participant/caregivers interests, consider assigning a volunteer with similar interests to pay special attention to them and to sit next to them (if in-person session).

Do a preliminary walk-thru at the session site – perhaps the week prior to the first session:

Meet any on-site contacts if they are different than your Sponsor contacts.

Check if there are any issues with parking, accessibility to the building & room, etc.

Check out arrangement of room, size of table, number of seats, etc.

Check on the technology set-up – how to access WiFi; connections to TV monitor, etc.

Quickly run through display of any power points, access to internet for YouTube and other sites, etc.

Likewise for an online, virtual meeting – conduct a walk-thru of the program agenda in advance of the first meeting:

Test conferencing software and interfaces (Zoom, Google Meet, etc.)

Get a representative "load" on to the system. For example, if you're expecting a total of twenty volunteers, participants, and care-givers; get that many volunteers, spouses, friends, and Sponsor personnel on the system to test out the online logistics.

Facilitate a quick run-through of the agenda and presentations. Make sure all the documents, power-points, etc look OK via screen sharing.

Determine what other logistical items will be needed. For example:

Name tags – pre-print them with first names only. Keep everyone on an equal and informal level. Collect and re-use after each session.

Handouts – arrange for printing of agenda and any other handouts so they'll be available at first session.

Any tactile items – replicas of old baseball cards for each participant; a baseball for each to grip during the session; be creative!

Discuss any findings or considerations with Sponsor contact and any other contacts at the Host site (if different than the Sponsor's location). Resolve any issues prior to the first session.

5b. FIRST SESSION

Now the key first session day has arrived! Here are considerations for "Day One".

Volunteers should arrive early and once again run through all the logistics considerations. Allow time for any "surprises" (technology glitch, room too cold or too hot, etc.). Likewise for online delivery – get started early and make sure interfaces are working properly.

Greet participants and caregivers as they arrive (either in person or online). Make them feel at home. Get them a name tag and agenda/handouts. If a volunteer has been pre-assigned to that participant, give them extra attention and sit next to them.

Allow plenty of time on the First Session agenda for introductions and sharing of the participants' and caregivers' interests. Get them to talk about favorite teams, favorite players, other interests.

Work through the rest of the agenda, establishing a pace that keeps things flowing smoothly but also allows attendees to share, converse, and connect. **REMEMBER** – **the goal is to get them talking and sharing their memories of the past!** If you don't finish the entire agenda – that's OK.

5c. EVALUATE HOW IT WENT

Immediately following the first session, the Team Leader should arrange for volunteers and Partner contacts to discuss how it went. What seemed to work well? What didn't work so well? Do changes need to be made for Session Two agenda and content? Do we need to adjust any logistical concerns that might require coordination with the Host site?

5d. EXPECT THE UNEXPECTED

It's inevitable that glitches will occur. Stay flexible and be prepared to adjust and move forward. A few problems that SABR facilitators have encountered and suggested solutions are on our web site here.

5d. NEXT SESSIONS

As you move forward to Session Two and beyond, here are some additional considerations:

Maintain continuity – participants will feel most comfortable in a familiar setting. Changes can bring on unwanted anxiety. To the extent possible, keep the overall framework of the sessions as consistent as possible:

Keep the agendas consistent in terms of agenda items and order of discussion.

Take note of where participants like to sit around the table. Put their name-tag on that seat so they feel comfortable it's their "reserved seating".

Likewise, volunteers should intersperse among the participants – especially considering any mutual interests shared by a volunteer with a participant (ex. they are both fans of the same ball team, etc.).

Be keen to participants' and caregivers' interests and incorporate into agendas over time.

If popular music of an era, or Oscar-winning movies, seem to be of interest; incorporate a discussion of those reminiscence topics into the agenda. Other topics might include popular TV shows of the era, classic cars, history-in-the making (the Moon landing), etc.

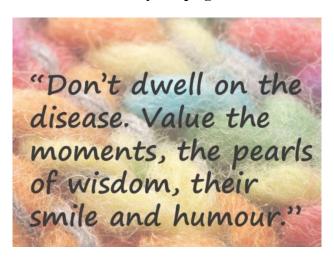
Likewise, look for areas of interest and ability where a participant or caregiver might want to present or "lead" a topic. For instance – a particularly strong singer might want to lead the group in singing "Take Me Out to the Ballgame"; a caregiver might want to talk about a recent outing to a baseball game; a participant and caregiver led an ongoing agenda topic in Texas entitled "Stump the Experts" – where they presented clues about a ballplayer's identity to see if they could "stump" the SABR volunteers. Likewise, a participant in Westchester, N.Y. gave a great presentation on Phil Rizzuto, including wearing a Yankees #10 jersey. Be open to the possibilities, but yet avoiding anything that would create undue anxiety.

Ask participants and their caregivers for suggestions for future program topics. This gives them input into what they'll experience.

Periodically evaluate where the program is at and where it needs to go.

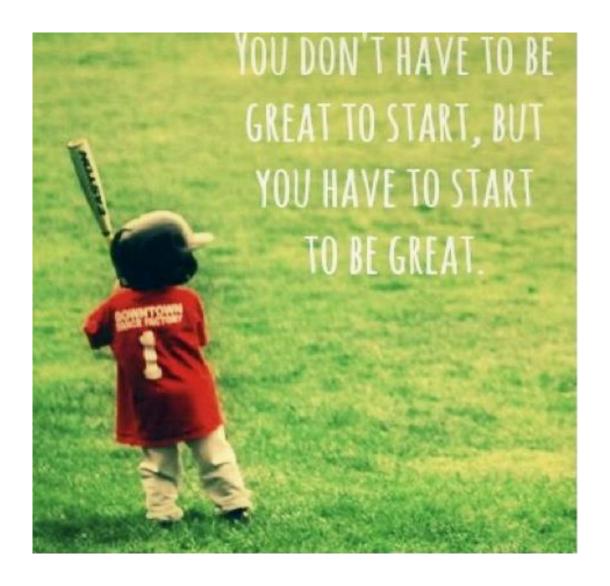
The Team Leader, volunteers, and Sponsor should periodically evaluate the program with the goal of making ongoing enhancements.





"Love is the most important thing in the world, but baseball is pretty good, too." – Yogi Berra

GO AHEAD – GET STARTED



and HAVE FUN DOING IT!