Upward Cheerleading Coach Application

Section 1 Name _ Mailing Address ______ ______ State _____ _____ Zip ____ Phone (day) ______ (evening) _____ (cell) _____ Email Address No If yes, where? Are you a member of a local church? Yes Gender: M F / / ____ Date of Birth **Section 2** (please circle) 1. Circle the age group you prefer to coach. Division 4 & 5yr olds 1st and 2nd Grade 3rd and 4th Grade 5th and 6th Grade 2. What is your preferred practice day? M T ΤH **3. What is your preferred practice time?** 5:30pm 6:30pm 4. What is your shirt size? WOMEN: S M L XL XXL XXXL 5. Please list your children who will be playing or cheerleading in this year's Upward Basketball & Cheerleading league, if applicable. Child's Name Gender Sport I plan to coach my child's team M basketball cheerleading No Yes M F basketball cheerleading Yes Nο basketball cheerleading M F Yes No 6. Have you ever coached Upward Cheerleading before? Yes No 7. Have you ever coached Upward Basketball before? Yes No 8. Have you made a personal commitment to Jesus Christ? Yes No Please share a little about your relationship with Jesus (use the back of this application if you need more room). 9. Do you know of someone who might be interested in coaching Upward Cheerleading this year? Name ______ Phone _____ Name _____ Phone _____ ______ Phone ______ Name ______ Phone _____ 10. Please circle which Coach Training Conference you will attend: Session I :: Date: TBD _____ Time: _____ OR Session II :: Date: TBD __Time: __

I understand that any negative personal habits that I have (smoking, alcohol, profanity, etc) may have a negative affect on a child's spiritual development. Understanding that the children on my squad have been placed under my guidance, I commit to setting a worthy behavioral example for them to look to.

Coach Signature	Date
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