



Upward Cheerleading Coach Application

Section 1

Name _____

Mailing Address _____

City _____ State _____ Zip _____

Phone (day) _____ (evening) _____ (cell) _____

Email Address _____

Are you a member of a local church? Yes No If yes, where? _____

Gender: M F Date of Birth ____ / ____ / ____

Section 2 (please circle)

1. Circle the age group you prefer to coach.

Division _____

Kindergarten - 2nd Grade

3rd and 4th Grade

5th and 6th Grade

2. What is your preferred practice day? M T W TH F

3. What is your preferred practice time? 4pm 5pm 6pm 7pm 8pm

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 league, if applicable.

Child's Name	Grade	Gender	Sport	I plan to coach my child's team
_____	_____	M F	basketball cheerleading	Yes No
_____	_____	M F	basketball cheerleading	Yes No
_____	_____	M F	basketball cheerleading	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 _____

Name _____ Phone _____ Name _____ Phone _____

10. Please circle which Coach Training Conference you will attend:

Session I :: Date: _____ Time: _____ OR Session II :: Date: _____ Time: _____

11. Which evaluation will you attend? Date: _____ Time: _____ Date: _____ 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 _____