



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
_____	_____	M F	basketball / cheerleading
_____	_____	M F	basketball / cheerleading
_____	_____	M F	basketball / cheerleading

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).

I understand that any negative personal habits that I have (smoking, alcohol, profanity, etc) may have a negative effect 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 _____