



Galt Jr Warriors Youth Football & Cheer

CHEER COACH APPLICATION

Full name:	<hr/>			Date:	<hr/>
	<i>Last</i>	<i>First</i>	<i>M.I.</i>		
Address:	<hr/>			Phone:	<hr/>
	<i>Street address</i>	<i>Apt/Unit #</i>			
	<hr/>			Email:	<hr/>
	<i>City</i>	<i>State</i>	<i>Zip Code</i>		

Coaching Position Applying For	Coaching Position Applying For (Select all that apply)
	<input type="checkbox"/> Head Cheer Coach <input type="checkbox"/> Assistant Cheer Coach <input type="checkbox"/> Jr. Coach <input type="checkbox"/> Other: _____

Preferred Level:

- Jr. Novice
- Novice
- Jr. Varsity
- Varsity

Are you available for practices (3-5 days per week) and all Saturday games? Yes No

Are you available for competitions, camps, events, and required coach meetings? Yes No

Are you able to attend coach meetings, clinics, and safety trainings? Yes No

Have you coached cheer before? Yes No Yes – Explain (levels, years, organization):

List any certifications currently held:

- CPR/First Aid**
- Concussion/Heads Up**
- Heat Illness Prevention**
- Stunt Safety Certification**
- Other:** _____

1. Are you willing to comply with the GJW Bylaws, Code of Conduct, Personal Gain Policy, and Volunteer requirements?

- Yes
- No

2. Are you willing to submit a background check if required?

- Yes
- No

Applicant Certification

By signing below, I certify that all information provided is true and complete to the best of my knowledge. I understand that providing false information may result in disqualification or removal from the Board.

Applicant Signature: _____

Date: _____

