

## Ballston Spa Pop Warner Cheerleading Coaching Application

I am interested for the following position ( please circle ):

<u>Head Coach</u>	<u>Assistant Coach</u>
Challenger    Cub    Mitey Mite    Jr. Pee Wee    Pee Wee    Jr. Midget    Midget	

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_  
 \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Coaching References:**

Name	Address	Phone	Relationship

**Coaching Experience(s):**

Organization	Year(s)	Age Level

**Cheerleading Experience(s):**

Organization	Year(s)

**Other Youth Group or Related Experience(s):**

Organization	Year(s)	Age Level

**Children Participating in BSPW:**

Organization	Year(s)

Do you have any medical condition that may affect your ability to coach? (If yes, please describe):

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Why do you want to coach for Ballston Spa Pop Warner?

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What is your main objective as a cheerleading coach?

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Please list any training or special skills you have that may relate to coaching:

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Please list three goals that you as a coach would like to accomplish during the season:

1 \_\_\_\_\_

2 \_\_\_\_\_

3 \_\_\_\_\_

Thank you for your interest in coaching for Ballston Spa Pop Warner Cheerleading  
Please mail completed applications to:

**BSPW**  
**PO Box 268**  
**Ballston Spa, NY 12020**

Deadline for submitting applications for the 2008 season is February 25, 2008  
You will be contacted by the cheerleading coordinator for an interview during the month of March  
You must attend the board meeting on April 7, 2008 for head coaching elections  
Assistant Coaches will be voted on at the board meeting to be determined