

**CANEY VALLEY ATHLETIC ASSOCIATION
JUNIOR FOOTBALL & CHEERLEADING**

2010 Coach Application

Please check one: Head Football Coach Assistant Football Coach Head Cheer Coach Assistant Cheer Coach

Please circle grade: 3rd Grade 4th Grade 5th Grade 6th Grade

Name: _____ Date of Birth: _____

Address: _____

City, State, Zip: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Email Address: _____

Do you have a valid driver's license: YES NO Driver's License # _____ State: _____ Exp: _____

Have you ever been convicted of or plead guilty to any crime(s)? YES NO

If yes, please explain: _____

Have you ever been refused participation in any other youth program? YES NO

If yes, please explain: _____

Please list all activities in which you have been involved working with children: _____

Please list coaching experience &/or athletic experience, include sport and age group: _____

Please list 3 references (include phone number):

Do you have current CPR qualifications: YES NO Expires: _____

Do you have current First Aid Safety: YES NO Expires: _____

Please describe your coaching philosophy: _____

"I authorize investigation of all statements contained herein and all information concerning previous coaching assignments and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you."

Signature of Applicant: _____ Date: _____

Applicant Name (please print): _____