



## CHEERLEADING VOLUNTEER APPLICATION

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

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

\_\_\_\_\_

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

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

Coaches T-shirt Size: XS S M L XL 2XL

### Availability

#### Practices

Monday \_\_\_\_\_ Tuesday \_\_\_\_\_

Wednesday \_\_\_\_\_ Thursday \_\_\_\_\_

#### Games

Saturday \_\_\_\_\_

Sunday \_\_\_\_\_

### Emergency Contact

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

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

### Committees Interested In

\_\_\_\_\_ Coaching

\_\_\_\_\_ Piggy Bowl

\_\_\_\_\_ Parade

\_\_\_\_\_ Banquet

\_\_\_\_\_ Fundraising

\_\_\_\_\_ Cheer Clinic

\_\_\_\_\_ Spiritwear

\_\_\_\_\_ Pictures

\_\_\_\_\_ Team Mom

