



LINCOLN YOUTH FOOTBALL & CHEER

P.O. Box 802
Lincoln, CA 95648-0802

<http://www.jrzebras.com>

2025 Board of Directors Application

Name: _____ Home. Phone: (____) _____

Address: _____ Bus. Phone: (____) _____

City: _____ State: _____ Zip: _____

E-Mail: _____ Cell Phone: (____) _____

Shirt Size – T-Shirt _____ Polo Shirt _____ Sweatshirt/Jacket _____

Do you plan on applying as a Head Coach/Assistant Coach? Yes No Maybe Squad: _____

Do you have a child in the program this year? Yes No Squad: _____

Will you have a child in the program this year? Yes No Squad: _____

Position Applying For: _____

References			
Name	Address	Phone	Relationship

Work, Non-Profit or Volunteer Experience			
Organization	Year	City/State	Position(s) Held

Have you ever been convicted of a Felony? Yes No If yes, please attach explanation.
 Do you hold a current CPR/First Aid Card? Yes No if yes, what is the expiration date? _____
 Do you have any special talents that the league could benefit from? Yes No If yes, please explain below



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If selected are you willing to attend and or/assist in the following:

Are you able to work game days? 7 AM-7 PM

Coaches Clinic: Yes No Coaches Meetings Yes No Fundraising Events Yes No

I understand that my duties as a member of the Board of Directors include enforcing all Lincoln Youth Football & Cheer and local association rules, attend **all** Board meetings, participate in **all** Jr. Zebra's fundraisers and activities, attend **all** home games and practices as coordinated. These duties are in addition to any "position specific" responsibilities. Furthermore, I understand that the obligation of the Board of Directors is to enhance the Lincoln Youth Football & Cheer organization to the best of our ability for the sake of the athletes participating and not for any personal gain or influence.

I understand this is a **One (1) year Commitment from January 1st 2025 through December 15th 2025.**

Acceptance of this application does not ensure a place on the 2025 Lincoln Youth Football & Cheer Board of Directors or an interview.

I declare the above information to be accurate and truthful. If I am selected to a position I will adhere to all the standard and expectations set forth by **Lincoln Youth Football & Cheer (LYFC) and the Governing Body to which we are affiliated.**

Print Name: _____ Date: _____

Signature: _____

Please mail original application to:

Lincoln Youth Football & Cheer

P.O. Box 802
Lincoln, CA 95648-0802

Or email:
secretary@jrzebras.com

For Official Use Only			
Date Received:	Accepted:	Declined:	Position: