

## **LINCOLN YOUTH FOOTBALL & CHEER**

P.O. Box 802 Lincoln, CA 95648-0802 http://www.jrzebras.com

## **2024 Board of Directors Application**

Name:	Но	Home. Phone: ()				
Address:		Bu	s. Phone: (	)		
City:		State:		Zip:		
E-Mail:		Ce	ell Phone: (	)		
Shirt Size – T-Shirt Polo S	hirt Sweatshir	t/Jacket	_			
Do you plan on applying as a Hea Do you have a child in the program Will you have a child in the program Position Applying For:	n this year? Yes m this year? Yes	No Squad No Squad	l: l:			
, 0						
References						
Name	Address		Phone	Relationship		
Work, Non-Profit or Volunteer	Experience					
Organization		City/State		Position(s) Held		
				, ,		
Have you ever been convicted of Do you hold a current CPR/First A Do you have any special talents the	id Card? Yes No i	f yes, what is t	the expiration da	ate?		



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If sel	ected	are you	willing to	o attend	and	or/assi	st ir	the i	followi	ng:
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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 2024 through December 31st 2024. Acceptance of this application does not ensure a place on the 2023 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 Declined: Position: Date Received: Accepted: