



LINCOLN YOUTH FOOTBALL & CHEER

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

2025 Junior Coach/Instructor Application

Name: _____ Home. Phone: (____) _____
 Address: _____ Bus. Phone: (____) _____
 City: _____ State: _____ Zip: _____
 E-Mail: _____ Cell Phone: (____) _____
 Current GPA: _____ T-Shirt Size _____ Polo Shirt Size _____ Sweatshirt/Jacket _____ Birthday _____

POSITION APPLYING FOR: Football Cheer

Division you are applying for:

Mascot Jr. PeeWee PeeWee Jr. Midget Midget

Coaching Experience (Please list all sports)			
Organization	Year	City/State	Position(s) Held

Junior Coaches/Instructors get the following endorsements before their application will be considered.

Parent or Guardian – As a parent I understand that my son or daughter is making a commitment that will impact several young athletes. As such I agree to do my part in assisting my son or daughter to make all practices, games and competitions. I further understand that my son or daughter will be held to the same standard as the rest of the coaching staff. As the parent or guardian, I endorse my son or daughter to be a Junior Coach/Instructor for the Lincoln Jr. Fighting Zebra’s.

Signature _____ Print Name _____ Date _____

High School Football/Cheer Coach – As a coach I understand the commitment that is required to instruct, motivate and inspire athletes to perform better each and every day. Based on my experience and interaction with the above-mentioned applicant I feel they would be a great fit to be a Junior Coach/Instructor with the Lincoln Jr. Fighting Zebra’s and further more would be able to handle the responsibility between school work, high school sports and the commitment required to be a Junior Coach/Instructor.

Signature _____ Print Name _____ Date _____



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Have you ever been convicted of a felony? Yes No If yes, please explain _____

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 _____

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

Coaches Clinic: Yes No Coaches Meetings Yes No

Fundraising Events Yes No

I understand this is a **One (1) Season Commitment that begins June 1st 2025.**

Please be prepared to explain your Coaching Philosophy. Acceptance of this application does not ensure a place on the 2025 Lincoln Youth Football & Cheer Coaching staff or an interview. Previous Coaching experience with LYFC does not guarantee a return coaching position.

Head Coaches are allowed to select their own coaching staff but before Assistant Coaches can be made official they must be approved by the LYFC Board of Directors and successfully submitted a coaching application and passed the required background check.

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 Sierra Athletic Conference (SAC).**

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: