



Strongsville Football League

Application for Cheer Squad Captain 2021 Football Season

PERSONAL INFORMATION

Name (Last, First): _____ Birth date: _____

Current Address: _____ Zip: _____

Home Phone: _____ Cell: _____ Email: _____

Primary method of contact (circle one): **Home** **Cell** **Email**

Can you be contacted via "text messages" to cell phone? **Y** **N**

Parent Name: _____ Phone: _____

Emergency contact – Name _____ Relation: _____ Phone: _____

Grade you will be entering for 2021-2022 school year. _____ If already graduated, list year: _____

School you are attending for 2021-2022 school year? _____ overall GPA: _____

Are you older than 18 years old? **Y** **N** Are you legally authorized to work in the US? **Y** **N**

CHEERLEADING EXPERIENCE: Please list all cheerleading experience (past or present- example: SHS, JV Basketball, Varsity Football)

DANCE EXPERIENCE: _____

LEADERSHIP EXPERIENCE: _____

Have you worked as a captain for the SFL? **Y** **N** If yes, what coaches have you worked with: _____

Grade level you would like to work with: _____ Coach preference? _____

Are you experienced and knowledgeable on choreographing a 2-3-minute half-time dance routine? **Y** **N**

Do you have transportation to/from cheer practices, games, and additional team building events? **Y** **N**

Circle the days for practices that work best for you? **M** **T** **W** **Th** **F** **Sa** **Su**

List any/all CONFLICTS (after school, evening, and weekends between Aug 1st and Oct 31st):



LEGALITY:

Have you ever been convicted of, plead guilty/no contest to, or had a suspended imposition of sentence for any offense (other than a minor traffic violation)? **Y** **N**

If yes, please explain: _____

(A convictional record will not necessarily exclude you from consideration. This information will be used only for job-related purposes and only to the extent permitted by law.)

AUTHORIZATION:

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

"I authorize investigation of all statements contained here in and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise and release the company from all liability for any damage that may result from utilization of such information.

"I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

"This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by The American with Disabilities Act (ADA) and other relevant Federal and State Laws."

Date: _____ Signature: _____

Please email your signed application to: SFLcheer411@gmail.com