

**Association Cheering Staff Contact Information**  
**Due Date: August 1<sup>st</sup> of current year**

Association: \_\_\_\_\_

Director:  
Name: \_\_\_\_\_ ID #: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Email: \_\_\_\_\_  
Home #: \_\_\_\_\_  
Cell #: \_\_\_\_\_

Asst Director:  
Name: \_\_\_\_\_ ID #: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Email: \_\_\_\_\_  
Home #: \_\_\_\_\_  
Cell #: \_\_\_\_\_

Flag: \_\_\_\_\_

Practice Location: \_\_\_\_\_  
Practice Days and Time: \_\_\_\_\_

Coach: Name: \_\_\_\_\_ ID #: \_\_\_\_\_  
Home #: \_\_\_\_\_  
Cell #: \_\_\_\_\_

Asst Coach: Name: \_\_\_\_\_ ID #: \_\_\_\_\_  
Home #: \_\_\_\_\_  
Cell #: \_\_\_\_\_

Asst Coach: Name: \_\_\_\_\_ ID #: \_\_\_\_\_  
Home #: \_\_\_\_\_  
Cell #: \_\_\_\_\_

Teen Helpers: Names: \_\_\_\_\_, \_\_\_\_\_  
\_\_\_\_\_, \_\_\_\_\_

# Association Cheering Staff Contact Information

## (Page Two)

Minor:

Practice Location: \_\_\_\_\_  
Practice Days and Time: \_\_\_\_\_

Coach: Name: \_\_\_\_\_ ID #: \_\_\_\_\_  
Home #: \_\_\_\_\_  
Cell #: \_\_\_\_\_

Asst Coach: Name: \_\_\_\_\_ ID #: \_\_\_\_\_  
Home #: \_\_\_\_\_  
Cell #: \_\_\_\_\_

Asst Coach: Name: \_\_\_\_\_ ID #: \_\_\_\_\_  
Home #: \_\_\_\_\_  
Cell #: \_\_\_\_\_

Teen Helpers: Names: \_\_\_\_\_,  
\_\_\_\_\_

Junior:

Practice Location: \_\_\_\_\_  
Practice Days and Time: \_\_\_\_\_

Coach: Name: \_\_\_\_\_ ID #: \_\_\_\_\_  
Home #: \_\_\_\_\_  
Cell #: \_\_\_\_\_

Asst Coach: Name: \_\_\_\_\_ ID #: \_\_\_\_\_  
Home #: \_\_\_\_\_  
Cell #: \_\_\_\_\_

Asst Coach: Name: \_\_\_\_\_ ID #: \_\_\_\_\_  
Home #: \_\_\_\_\_  
Cell #: \_\_\_\_\_

Teen Helpers: Names: \_\_\_\_\_,  
\_\_\_\_\_

# Association Cheering Staff Contact Information

## (Page Three)

Senior:

Practice Location: \_\_\_\_\_  
Practice Days and Time: \_\_\_\_\_

Coach:

Name: \_\_\_\_\_ ID #: \_\_\_\_\_  
Home #: \_\_\_\_\_  
Cell #: \_\_\_\_\_

Asst Coach:

Name: \_\_\_\_\_ ID #: \_\_\_\_\_  
Home #: \_\_\_\_\_  
Cell #: \_\_\_\_\_

Asst Coach:

Name: \_\_\_\_\_ ID #: \_\_\_\_\_  
Home #: \_\_\_\_\_  
Cell #: \_\_\_\_\_

Teen Helpers:

Names: \_\_\_\_\_, \_\_\_\_\_  
\_\_\_\_\_, \_\_\_\_\_

Competition Schedule:

Name of Competition	Location	Date
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____