



Rev 2011 Juneau Youth Football League
Board Of Directors Application

PO Box 211409
Auke Bay, AK 99821

Part I: Personal Information

Name _____ Home Ph _____

Address _____ Work Ph _____

_____ Dr License _____

Email _____ State _____ Exp Date _____

Employer _____

Address _____

_____ Occupation _____

Part II: Skills

Please check the skills and/or education you could contribute to the board. (Check all that apply)

<input type="checkbox"/> Accounting/ Bookkeeping	<input type="checkbox"/> Management	<input type="checkbox"/> Public Relations
<input type="checkbox"/> Marketing	<input type="checkbox"/> Health/Safety	<input type="checkbox"/> Fund Raising
<input type="checkbox"/> Coaching/ Teaching	<input type="checkbox"/> Computer Skills	<input type="checkbox"/> Coordinating Parents
<input type="checkbox"/> Prior Youth Boards	<input type="checkbox"/> Food Service	<input type="checkbox"/> Administrative
<input type="checkbox"/> Other (please specify)		

Part III: Community Involvement

Please be as complete as possible in responding to this section. This type of information is often requested by granting agencies. The information provides additional information about you that may be useful when new projects and/or ideas are discussed. (Use the back of the form if you require more space.)

On which other boards or organizations have you served?

With board positions interest you?

<input type="checkbox"/> President	<input type="checkbox"/> Vice President	<input type="checkbox"/> Secretary
<input type="checkbox"/> Treasurer	<input type="checkbox"/> Communications	<input type="checkbox"/> Equipment
<input type="checkbox"/> Football Coaching	<input type="checkbox"/> Cheer Coaching	<input type="checkbox"/> Participant Safety
<input type="checkbox"/> Concessions	Parent/Participant for	<input type="checkbox"/> Fields & Facilities
<input type="checkbox"/> Flag <input type="checkbox"/> CubFB	<input type="checkbox"/> JuniorFB <input type="checkbox"/> SeniorFB	<input type="checkbox"/> Cheer

Do you currently have children participating in the JYFL program? Yes No

If so, what division(s) _____ Football Cheer

If not, have your children participated in JYFL in the past? Yes No

Please list 3 references that have knowledge of your character, experience or ability:
 Name _____ Phone # _____ Relationship _____

Any other comments or information you wish to provide:

I have read and agree to abide by the JYFL Rules and JYFL Bylaws: Yes

* I affirm that all information made on or in connection with this application is true and complete to the best of my knowledge and belief and I have not knowingly withheld any fact of circumstance.

* I authorize my references to release to the JYFL Board any information they may have regarding my character. I release them from any damage or claim for furnishing this information.

Signature: _____ Date: _____

Attached is a completed agreement to allow security screening of my background by JYFL's security contractor: Yes