SPIRIT JUDGE APPLICATION

RETURN BY AUGUST 15, 2026 TO:

Monica Woods
OSSAA
P.O. Box 14590
Oklahoma City OK 73113-0590
Fax – 405-840-9559

NAME: _____

ADDRESS: _____

CITY:_____ STATE _____ ZIP_____

PHONE _____ WORK PHONE _____

CELL PHONE:_____ EMAIL:_____

Are you a teacher? _____ If yes, where?_____

If not, are you connected in any way with any local school system? _____ How? _____

Were you a high school cheerleader?_____ Where? _____

Were (are) you a college cheerleader? _____ Where? _____

Are you currently coaching? _____ If yes, where?_____

Have you been a high school cheerleading coach?_____Where? _____

Do you or have you recently worked with a squad coach or choreographer?_____

What schools? _____
When? _____

Have you judged high school cheerleading tryouts? _____Where? _____

Have you worked summer clinics or other clinics serving Oklahoma squads for the past two years? _____

If so, what camp and what squads? _____

When was the last time you worked a clinic or camp?_____

What credentials do you bring as a cheerleading judge? _____

_____

_____

REFERENCES (AT LEAST TWO PLEASE):

Name: _____

Address:_____

Phone: _____Relationship: _____

Name: _____

Address:_____

Phone: _____Relationship: _____