

# **TRI-CITIES FAMILY YMCA GRAND HAVEN, MI JOB DESCRIPTION**

JOB TITLE: GYMNASTICS COACH

SUPERVISOR: Katie Steele

## **GENERAL FUNCTION:**

Teach the sport of Gymnastics to the BEST of our ability to our YMCA members.

1. Mature judgment and ability to communicate effectively with staff, children and parents.
2. Certified in First Aid & CPR and be familiar with facilities emergency procedures.
3. Experience in teaching gymnastics in a team setting.

## **JOB REQUIREMENTS/RESPONSIBILITIES:**

1. Provide a safe, fun, secure setting for children to learn in.
2. Provide continuous supervision at all times.
3. Supervise and be actively involved with the class and warm up activities of children so as to maintain order and discipline.
4. Keep attendance records for your classes.
5. Develop and maintain open communication with all parents.
6. Communicate to coordinator any problems, concerns or suggestions regarding children.
7. Show enthusiasm when teaching children and treat all children fairly.
8. Assist YMCA in positively marketing the facility and programs to YMCA members and community. (Read YMCA brochures & be very familiar with gymnastics classes/levels, handbooks, flyers, etc)
10. Be punctual. Arrive 15 minutes prior to class to set up & prepare for class. Early is on time, on time is late & Late is never acceptable.
11. Keep an accurate inventory of supplies and equipment and notify coordinator when replacement or repair is necessary.

12. Keep gym, seating area and equipment clean at all times.
13. Attend staff meetings and meet with coordinator as scheduled.
14. Dress appropriately for coaching duties (Including blue shirt, name tag, black pants or shorts and tennis shoes.)
15. Maintain and project a positive attitude in the gymnastics area and all other areas of the YMCA. I will not partake in rumors or negative discussions regarding the center or employees.
16. Employees should be in assigned area at all times while clocked in. No cell phones or texting while clocked in. (Emergencies only)
17. Fill out incident reports when needed and turn them in to Coordinator.

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(SIGNATURE OF EMPLOYEE)

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(DATE)

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(PRINTED NAME)