

For Office Use Only
Amount Received: _____
____ Cash, Receipt # ____
____ Check # ____
Date Received ____ Initials ____

2024-2025 St. Mary Parish 4-H Shooting Sports Registration Form

Due by October 16, 2024 **at the 4-H Office only** before 4:30 pm with a *nonrefundable* \$80 fee. MUST be enrolled as a 4-H member.

Fee covers club registration, competition shirt, and 1 discipline for Regional Competition.

- 1) Participant's Name: _____
- 2) What discipline will they be participating in? (Circle One) archery .22 rifle shotgun
- 3) Phone Number: _____
- 4) Address: _____
- 5) Name of School/Club: _____ Grade: _____
- 6) Age (as of 12/31/24): _____ (must be 9 yrs. old or older) Date of Birth: _____
- 7) Email address (please print legibly): _____
- 8) Participant's T-shirt Size (Circle One): YS YM YL AS AM AL AXL AXXL
AXXXL
- 9) Is the participant Hunter Education Certified? (Circle One): YES NO
 - a) If yes, provide # and issue date: _____
- 10) Parent(s) Name(s): _____

Mail to: St. Mary Parish 4-H
Shooting Sports Registration
600 Main Street
2nd Floor Blevins Bld.
Franklin, LA 70538

NON-REFUNDABLE- Registration and
Competition Fees (includes competition shirt) \$80
Make check payable to **4-H Foundation**
Late registration will **NOT** be accepted & will be returned.

Participation Guidelines:

- All Shooting Sports participants must be properly enrolled in as a St. Mary Parish 4-H club member.

- **Adult attendance and participation at all meetings, practices and competitions is REQUIRED for safety reasons.**
- Everyone (includes participant, parents, and coaches) must sign-in and sign-out at the designated location for each discipline. You will only get credit for the actual hours you participate.
- Ages for participation- must be 9 years of age as of December 31, 2024 to participate and **MUST** get Hunter Education certified prior to competitions. It is the responsibility of the members to complete training outside of the Shooting Sports program. (The program will attempt to hold a Hunter Education session for the members who are not certified, but not definite)
- The 4-H agent, coordinators and instructors reserve the right to disqualify any participant from the program for safety violations and failure to follow instructions. The concern for safety is of primary importance.
- In order to participate in regional and/or state competitions, the participant is required to complete **8 hours** of 4-H Shooting Sports training in their discipline each year. The instructor and/or coordinator will verify hours and validate registration forms for competition.

There are some materials we ask to be provided by our members. Here is list for each of our disciplines

22 (CMP)

- We will be taking **40 participants** in this discipline with returning shooters having 1st choice, then remaining spots will be filled on a 1st come 1st serve basis.
- Shooters personal items needed
 - Shoot mat or towel
 - Bag for supplies
 - Eye protection and ear plugs
 - Rifle if one is owned, needs to be a competition rifle

Shotgun

- We will be taking **20 participants** in this discipline with returning shooters having 1st choice.
- Personal items needed
 - Shells
 - Shell holder
 - Clays
 - Shotgun if one is owned

Archery

- We will be taking **25 participants** in this discipline with returning shooters having 1st choice.

- Personal items needed
 - Arm guard
 - Finger tab
 - Shooting glove or hand release (if shooting compound)
 - Competition bow if one is owned

***Mandatory safety meeting will be held Saturday, October 26 at 8:00 am at the St. Mary Parish Shooting Range, all disciplines are expected to attend, with **both shooter and at least one parent**.

***For those not present at the first safety meeting a second will be held on Tuesday, October 29th at 6:00 pm at the 4-H Office in Franklin at the Blevins Building.

If you miss both of these meetings your member will not be able to participate in the Shooting Sports Program.

I have read and understand all terms and guidelines stated within the St. Mary Parish Shooting Sports Program.

Parent Name: _____

Date: _____

Parent Signature: _____