



Registration NJ 4-H Shooting Sports Invitational

Registration must be received by: Saturday, April 22 (no late registrations will be accepted)

One registration and one check per club please

County: _____ **Club Name** _____

Contact Phone Number: _____

Email: _____

1	Name	Grade	Jr.	Sr.	Participant is Proficient		
					Archery	Rifle	Shotgun
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							

Be sure to follow the registration instructions on the second page of this registration form.

Registration Instructions:

Team will be mixed county teams (2 kids per county) on a team.

The following adult parents/volunteers have agreed to be a team coach, Each club must have one adult chaperone coach for every two participants registered. Coaches will reside with a team during the course of the day.

Each Participating team will take part in Archery Games, 3-D Archery and Air Rifle Games.

By signing this form, the shooting sports club leader is verifying that all the youth entered are...

1. Members in good club standing and have met all the member in good standing guidelines set by Rutgers Cooperative Extension. **(Participants must have joined 4-H prior to January 1, 2017, in order to participate).**
2. Knowledgeable and proficient in the safe use of the equipment and the fundamentals of the event. (Match and/or range officials may dismiss or disqualify a participant if he/she believes the participant does not demonstrate the basic proficiency and knowledge required).

Each participant must fill out the event participation form and must sign the code of conduct section on the back of the form.

Check and Registration

Club leaders, please include **one** check for total amount payable to **NJS4HSSAC** and send forms to Kim Frey, 30 John Drive, Annandale, NJ 08801, **no later than Saturday, April 22, 2017**

I have enclosed one check made out to NJ4HSSAC

I have _____ participants at \$10 per person TOTAL for Participants _____

I have _____ lunches at \$5 each TOTAL lunches _____

Check total \$ _____ Check # _____

Signature of Leader

Date

County 4-H Staff

Date