MONTANA 4-H SHOOTING SPORTS PROGRAM INFORMED CONSENT

l,	, am parent / legal guardian of and
(parent or guardian name)	
responsible for	who is enrolled in the Shooting Sports
(4-H members name)	Market and the second of the second s
	, Montana. I am aware, understand and accept the program
and its continuing curriculum.	
My child is enrolled in the following	Discipline of the 4-H Shooting Sports Program.
() Pistol (BB, Pellet, or .22 cal)	
() Black Powder (.32, .36, .44, .45 &	50 cal)
() Western Heritage (.22, .38, .45)	: .oo cai)
() Hunting Skills	
• •	
() Rifle (BB, Pellet, .22 cal.)	augo)
() Shotgun (.410, 28, 20, 16 & 12 g	
() Archery (Recurve & Compound	, אטן
As an annulles in this dissipline I am	a aware of the sporting equipment involved, circumstances of its
	e. I am aware of the fact that, there is a potential physical danger to
	raining are not provided and followed. With respect to this
	hat are coaching and providing the instructional training will deem
	e from time to time for the best interests of all involved. The
foremost concern is safety with skill	attainment and enjoyment second.
l am also awaro and undorstand that	my child from time to time will be touched, moved and helped into
	de continuity in curriculum training for the discipline being taught.
positions, balance, connort to provid	te continuity in curriculum training for the discipline being taught.
l am also aware that even though my	child enrolls in the 4-H Group Accident Policy this may not be
I am also aware that even though my child enrolls in the 4-H Group Accident Policy this may not be adequate insurance coverage. I understand I may provide added coverage for accident and liability at	
my own expense.	erstand i may provide added coverage for accident and nability at
my own expense.	
I therefore am aware of the program	, instruction and training being taught, requirements of the
	ed and potential dangers if safety is not followed.
shooting discipline, the risks hivelyt	a una potential dangers il salety is not followed.
Signature Parent / Legal Guardian	Signature 4-H Shooting Sports Enrollee
4-H Club Leader	Signature Instructor / or / County Extension Agent
Date	Phone
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Must be completed, signed and returned to the local County Extension Office before youth will be	

(Must be completed, signed and returned to the local County Extension Office before youth will be allowed to participate in 4-H Shooting Sports Program/Event).

