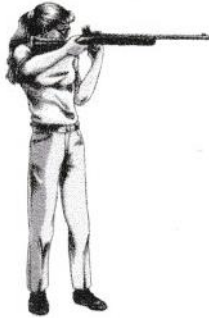


4-H/NRA B B Gun 7th ANNUAL SECTIONAL
SPONSORED BY Chippewa County 4-H Shooting Sports

_____ B B Gun 4 Position...40 shots (Wis. 4-H Designated Precision B B Gun)



Chippewa County 4-H Shooting Sports is sponsoring a 4-H/NRA Indoor B B Gun Sectional on ***April 5-6, 12 & 13 at the Westgate Sportsman Club, Eau Claire.***



NRA Junior Sectionals are held all across the country using the same exacting NRA rules. When all the sectionals are completed, the results are sent in to the NRA, and a "National Championships Results Bulletin" is published. The Orion computerized scoring system is used.



Because of the nature of 4-H, which is formed around youth, not sports, 4-H Shooting Sports is at entry and intermediate level shooting. This tournament is a chance for B B gun shooters, who are "into" shooting sports, to move up and compare themselves to other B B gun shooters from across the country.



The registration fee is \$10.00. **Also**, NRA AFFILIATION IS NOT REQUIRED. **Your group can register as a team for \$7.00 for**

team sectional awards and for National Team placings. Fee includes a wildlife component with awards.

LOCATION: On April 5-6, 12 & 13 held at Westgate Sportsman Club, Eau Claire, WI – GPS: 4909 Sportsman Dr. N., Eau Claire, WI. 54703.

- AWARDS -

AWARDS: NRA provides **gold, silver, and bronze medallions** to top overall finishers in each event as well as to the top team. Chippewa County 4-H Shooting Sports will provide **medals to place finishers in each of three age** categories, as well as for each of the shooting positions in each of the three age categories.

EQUIPMENT: All equipment will be checked to meet official NRA rules and regulations. In the past only the Daisy Model 499 gun has been used.

Return the attached registration form by April 1, 2019 to Joe Tiry, 34111 County Hwy. O, Stanley, WI 54768.

For more information, call Joe Tiry at (715) 644-2538, cell: 715-379-1071, **OR** E-mail: jtiry@centurytel.net.

4-H/NRA B B GUN SECTIONAL
Sponsored by Chippewa County 4-H Shooting Sports
REGISTRATION AND PERMISSION STATEMENT
April 5-6, 12 & 13, 2019

Name of Shooter _____ E-mail address _____

****MAKE SURE EMAIL ADDRESS IS LEGIBLE AND CURRENT****

Address _____ City, State, Zip _____

County/Shooting Club _____ Date of Birth _____ Telephone _____

Current Age as of Date of Relay _____

Please mark first and second choice for shooting time.

CONFIRMATION OF SHOOTING SECTIONAL TIME WILL BE HANDLED BY E-MAIL.

Friday, April 5: _____ 7:00 p.m. Saturday, April 6: _____ 10:00 a.m. Saturday, April 6: _____ 1:00 p.m.
Friday, April 12: _____ 7:00 p.m. Saturday, April 13: _____ 10:00 a.m. Saturday, April 13: _____ 1:00 p.m.

(All Shooters should be at the site 45 minutes prior to shooting time.)

"SPONSOR RESERVES THE RIGHT TO ADD OR ALTER RELAY TIMES ACCORDING TO REGISTRATION NUMBERS."

Age Group - Check one: NRA age designation.

_____ B B - 1 – born in 2004, 2005, 2006

_____ B B 2 – born in 2007, 2008, 2009

_____ B B 3 – born in 2010 or later

My NRA Competition Number is: _____

Your competitor number will be asked for when you sign in on the day of the sectional. One of the following will apply:

- If you are an NRA member, give your membership number.
- If you are NOT an NRA member, but have shot in a sectional before, the NRA computer assigned you a number. If you don't know it, please call: Competitor's Liaison at the NRA, 703-267-1468 and they will find your number. (PLEASE NOTE: this is not your CMP number)
- ***If you have NEVER shot in an NRA sectional before, you don't have a number; just leave this blank and the computer will automatically assign you a number for the next time you shoot.***

This number is used in the NRA National Shooter Classification System.

I hereby give permission for my child to be involved in the 2019 4-H/NRA B B Gun Sectional. I understand that my child will be shooting air rifles at a rifle range using NRA rules.

I release the University of Wisconsin-Extension, its employees and volunteer 4-H leader(s) from any financial responsibility for sickness or accident to my child while in transit to or from, and in attendance at this Shooting Sports event. I hereby authorize the event's responsible person to incur expense considered necessary to insure prompt attention in case of serious sickness/accident. I agree to pay for necessary expenses incurred, if this is not covered by an accident/sickness insurance policy.

I understand that I must provide adequate eye protection for my child with safety glasses. I also understand that all 4-H and NRA range and safety rules will be followed.

I release any pictures/videos taken at this tournament to be used for educational/media purposes.

Additionally, I hereby give consent to the officer in charge to use reasonable disciplinary action with my child while at the shoot, if needed. This can include disqualification or removal from the grounds.

Signature of Parent/Guardian

Signature of Shooter

Date

RETURN BY April 1 with a check payable to: **CHIPPEWA COUNTY 4-H SHOOTING SPORTS**

ADVANCED REGISTRATION HELPS IMMENSELY TO MAKE THE SHOOT RUN SMOOTHLY, ON TIME, AND INSURES A SHOOTING LANE WHEN YOU GET TO THE SHOOT.

MAIL TO: Joe Tiry, 34111 County Hwy "O", Stanley, WI 54768