

Kettle Moraine 4-H Shotgun, Muzzleloading, & .22 Rifle Tournament

.22 Rifle Registration Form - Saturday, May 16, 2020 8:00 AM - 2:00 PM

Saukville Rifle & Pistol Club, 4191 Blue Goose Road, West Bend, WI 53090

Sponsored by the Tri-County 4-H Committee - Ozaukee, Sheboygan, & Washington County 4-H Shooting Sports

You are limited to 3 events in .22 Rifle. There is a \$8.00 fee for the 1st class and \$6.00 each for additional classes. To be eligible to take part in this tournament you must be registered as a Wisconsin 4-H Shooting Sports .22 rifle project member as recognized in your county.

Shooting TIMES:

9:00 AM / 10:00 / 11:00 // 12:00 PM / 1:00

WRITE in your selected TIME in the CLASSES You are shooting

We will try to schedule your times as requested.

***You are required to email or call us to confirm your shooting times after May 9th.**

Intermediate (12 yr-14 yr) **"X" for Class** **Time**

3 Position - Prone, Standing, Kneeling

.22 Rifle Sporter (50 ft. Target No scope) _____ _____

.22 Rifle Unlimited (50 ft. Target) _____ _____

Silhouettes-Sights-SPORTER Standing _____ _____

OR (choose one only)

Silhouettes-Scope Any rifle - Standing _____ _____

Senior (15yr-19 yr.) **"X" for Class** **Time**

3 Position - Prone, Standing, Kneeling

.22 Rifle Sporter (50 ft. Target No scope) _____ _____

.22 Rifle Unlimited (50 ft. Target) _____ _____

Silhouettes-Sights-SPORTER Standing _____ _____

OR (choose one only)

Silhouettes-Scope Any rifle - Standing _____ _____

- Your division is determined by your birthday as the day of the event.
- **A participant may enter three events in the .22 Rifle Tournament.** The wildlife contest is not counted as an event. It is required for participants planning on the National Qualifying opportunity.
- The Tournament Committee/Range Officer's decisions are final
- **Ammo will be available for sale at the tournament.**
- **A copy of your DNR hunter safety must accompany this registration form.**
(a photo or scanned copy may be sent or emailed to nbyogert@gmail.com)
- **Write your hunter safety number here: #** _____
- Tournament rules and .22 rifle safety rules are available from your .22 rifle leader, or on the 4-H State /Shooting Sports website: <http://fyi.uwex.edu/wi4hshootingssports/>, or contact your extension office.
- _____ I request physically challenged accommodations. Please define on other side.
- **EAR AND EYE PROTECTION IS REQUIRED.**
- _____ **Indicate (NQ) for 4-H National Qualifying opportunity on the event line. NQ participants are required to complete wildlife test to be eligible for NQ.**
- **I certify that this shooter is currently enrolled in the .22 rifle project, has listed the correct equipment, and is entered in the correct classes.**

4-H Certified County .22 Rifle Leader

Signature _____ **Ph#** _____

++ An incomplete registration form will not be accepted. +++

Wildlife Competition: 8:00AM to 12:00 PM. **Separate classes. No fee required for registered shooters.** Shooters are automatically entered in Wildlife. See the 4-H webpage for wildlife information: <http://fyi.uwex.edu/wi4hshootingssports/>

REGISTRATION DEADLINE: Postmarked by Saturday, May 2, 2020 **Email entry forms must be received before midnight that day with payment & original registration received here by May 6th.** **You are required to confirm your shooting times.**

Register at least 1 hour before shooting. Allow time for equipment inspection before shooting. Allow additional time before or after shooting for the wildlife contest.

Name _____ **Birth Date** _____ **Age** _____ **Phone** _____

Address _____ **City, State, Zip** _____

4-H Club _____ **County** _____ ***E-mail** _____

****I have read and understand the 4-H .22 rifle safety rules and tournament rules regarding participation in this event.***

Permission Statement: I grant permission for my child to participate in the Kettle Moraine 4-H Shotgun, Muzzleloading, & 22 Rifle Tournament. I release Saukville Rifle & Pistol Club, their volunteers & employees, UW Board of Regents, U-W Extension employees, volunteers, other participants, and donors from any financial responsibility for sickness or accident related to the tournament and/or while in attendance. I agree to pay all expenses for property damage and medical expenses not covered by insurance. I authorize the use of photographs or videos of my child, my family, and myself while attending/participating in this tournament for educational or media purposes. I grant the UW Board of Regents and UW-EX the right to use, publish, and copyright my image (including audio, moving image, or photograph) for educational programs, websites, and promotion of University programs. + **An incomplete registration form will not be accepted.** +

Signature: Parent/Guardian _____ **Date** _____ **Participant Signature** _____

Total fees: _____ Check Number _____ Make checks payable to: Washington Co. 4-H Shooting Sports

Mail to: Barb/Norb Yogerst, 2401 Western Avenue, Jackson, WI 53037 PH: 262-677-2379 EM: washingtonco4hshootingssports@gmail.com

Please return this form with payment. Keep a copy for your records. Copy as needed .22Rifle/2020 SMRTournament/2-20