MISSOURI 4-H SHOOTING SPORTS

PARENTAL PERMISSION

We, the parents (legal guardians) of ________________________________, grant permission for their participation in the 4-H Shooting Sports program; and approve of the use of firearms, live ammunition, and/or archery equipment while participating under the supervision of a 4-H Certified Shooting Sports Leader. I understand that shooting sports can be potentially hazardous activities and certain risks are involved with this activity. These potential hazards include gunshot or archery wounds and can result in paralysis, loss of vision, limb or life. I agree that participation in this activity is entirely voluntary and agree that I will not hold the 4-H project leaders, County Extension Council, State 4-H staff, local extension staff, University of Missouri Outreach and Extension, or the Curators of the University of Missouri liable for any accidents.

I also understand that safety procedures and practice will be strictly adhered to and that our child (guardian) may be immediately expelled without recourse, from the program as result of horseplay, inattentiveness, inappropriate conduct, violation of safety rules, or failure to follow the range officers directions.

We also agree to the following:

a. At least one parent must attend all shooting events, meetings, practices, etc.
b. Parents will be responsible for transportation to and from said events.
c. Due to safety concerns, siblings who are not enrolled in the program are not allowed to attend said events.
d. Members will be responsible for providing their own equipment. The exception to this rule is: members are not allowed to bring ammunition to events. Ammunition will be provided by the program. There will however, be a small annual fee charged for each member to purchase ammunition and other items, which will be collected by the certified leader. The leader will purchase appropriate ammunition and transporting it.
e. There may be other small fees that apply, such as membership dues or special permits that have to be purchased when using shooting ranges or other facilities.

Childs Name ____________________________________________________________

Parent Signature _______________________________________________________

Date