

Pre-Registration
4-H Shooting Sports State Team Try-out
Team 2025

\$10 on-site-registration fee - please refer to website for tryout dates.

\$10 fee for additional teams after the first. (For example, the fee to try out for Muzzleloading and Smallbore Pistol would be a total of \$20)

See information sheet/web site

Date of Birth: _____

Name: _____ County of 4-H membership _____

Address: _____ Home Phone #: _____

Shirt Size: _____
(Adult men/unisex)

Parent's email: _____ Cell Phone (parent): _____
(please print clearly)

Youth email: _____ Youth cell: _____

Team(s) trying out for:

Name of your 4-H certified SS leader: _____

*4-H Youth Specialist or Youth Program Assistant: _____
(Signature required approving your entry)

Please accept my registration for the Missouri 4-H national qualifying shoot and clinic. I am fully committed to attending the National Invitational, June 2025, if selected. I am also ready to accept the necessary financial obligation for participation as well as participate fully in all fund-raising efforts. Furthermore, I agree to do my best in my personal preparation for the national competition and will do my best to participate in any "team" practice sessions prior to the national event.

Signature of 4-H member date

Signature of parent/guardian date

Please include the **\$10 fee for 1st team try out; plus \$10 for each additional team try out**).

Make checks payable to: University of Missouri
Mail: Jim Sappington
Shooting Team Try outs
304 Gentry Hall
Columbia, MO 65211

Health Form not required. Will download from 4-H Online