

# Green County 4-H Shooting Sports Archery

2008



The signature below states the participant agrees to follow the rules and regulations set forth by the Archery program and will not deviate from them. The participant agrees to follow all directions from the instructors to keep this program safe and enjoyable

**Participant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

The signature below states the participant's parent is allowing the child to be a part of the Archery Program. The parent agrees to support the child and the program to their utmost ability.

**Parent Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please complete the following. This information will be kept confidential and used only for the welfare of the participant. Thank you!

**In case of emergency, contact:**

Parents/Guardian Name: \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_ Cell Phone ( ) \_\_\_\_\_

Contact person if parent/guardian not available: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_ Cell Phone ( ) \_\_\_\_\_

We hope to make this a year of knowledge and enjoyment for all those involved. We urge the parents and the participants to give us feedback throughout the year in order to establish a strong Archery Program for the future.

Mike & Gina Butson	543-3832
Ron Gordee	329-4245
Naomi Gordee	329-4245
Tim Olmstead	543-3897
Craig Roth	862-4334
Tim & Dixie Stechschulte	543-3952

**UW**  
**Extension**

Alissa Grenawalt  
4-H & Youth Development Agent  
N3150B Hwy 81, Monroe, WI 53566  
328-9440 [alissa.grenawalt@ces.uwex.edu](mailto:alissa.grenawalt@ces.uwex.edu)



# Green County 4-H Shooting Sports .22 Rifle

2008



The signature below states the participant agrees to follow the rules and regulations set forth by the .22 Rifle program and will not deviate from them. The participant agrees to follow all directions from the instructors to keep this program safe and enjoyable.

**Participant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

The signature below states the participant's parent is allowing the child to be a part of the .22 Rifle Program. The parent agrees to support the child and the program to their utmost ability.

**Parent Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please complete the following. This information will be kept confidential and used only for the welfare of the participant. Thank you!

**In case of emergency, contact:**

Parents/Guardian Name: \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_ Cell Phone ( ) \_\_\_\_\_

Contact person if parent/guardian not available: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_ Cell Phone ( ) \_\_\_\_\_

We hope to make this a year of knowledge and enjoyment for all those involved. We urge the parents and the participants to give us feedback throughout the year in order to establish a strong .22 Rifle Program for the future.

Mike & Gina Butson	543-3832
Ron Gordee	329-4245
Naomi Gordee	329-4245
Tim Olmstead	543-3897
Craig Roth	862-4334
Tim & Dixie Stechschulte	543-3952

**UW**  
**Extension**

Alissa Grenawalt  
4-H & Youth Development Agent  
N3150B Hwy 81, Monroe, WI 53566  
328-9440 [alissa.grenawalt@ces.uwex.edu](mailto:alissa.grenawalt@ces.uwex.edu)



# Green County 4-H Shooting Sports Shotgun

2008



The signature below states the participant agrees to follow the rules and regulations set forth by the Shotgun program and will not deviate from them. The participant agrees to follow all directions from the instructors to keep this program safe and enjoyable

**Participant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

The signature below states the participant's parent is allowing the child to be a part of the Shotgun Program. The parent agrees to support the child and the program to their utmost ability.

**Parent Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please complete the following. This information will be kept confidential and used only for the welfare of the participant. Thank you!

**In case of emergency, contact:**

Parents/Guardian Name: \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_ Cell Phone ( ) \_\_\_\_\_

Contact person if parent/guardian not available: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_ Cell Phone ( ) \_\_\_\_\_

We hope to make this a year of knowledge and enjoyment for all those involved. We urge the parents and the participants to give us feedback throughout the year in order to establish a strong Shotgun Program for the future.

Mike & Gina Butson	543-3832
Ron Gordee	329-4245
Naomi Gordee	329-4245
Tim Olmstead	543-3897
Craig Roth	862-4334
Tim & Dixie Stechschulte	543-3952

**UW**  
**Extension**

Alissa Grenawalt  
4-H & Youth Development Agent  
N3150B Hwy 81, Monroe, WI 53566  
328-9440 [alissa.grenawalt@ces.uwex.edu](mailto:alissa.grenawalt@ces.uwex.edu)



# Green County 4-H Shooting Sports Air Rifle/Air Pistol

2008



The signature below states the participant agrees to follow the rules and regulations set forth by the Air Rifle/Pistol program and will not deviate from them. The participant agrees to follow all directions from the instructors to keep this program safe and enjoyable

**Participant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

The signature below states the participant's parent is allowing the child to be a part of the Air Rifle/Pistol Program. The parent agrees to support the child and the program to their utmost ability.

**Parent Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please complete the following. This information will be kept confidential and used only for the welfare of the participant. Thank you!

**In case of emergency, contact:**

Parents/Guardian Name: \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_ Cell Phone ( ) \_\_\_\_\_

Contact person if parent/guardian not available: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_ Cell Phone ( ) \_\_\_\_\_

We hope to make this a year of knowledge and enjoyment for all those involved. We urge the parents and the participants to give us feedback throughout the year in order to establish a strong Air Rifle/Pistol Program for the future.

- |                          |          |
|--------------------------|----------|
| Mike & Gina Butson       | 543-3832 |
| Ron Gordee               | 329-4245 |
| Naomi Gordee             | 329-4245 |
| Tim Olmstead             | 543-3897 |
| Craig Roth               | 862-4334 |
| Tim & Dixie Stechschulte | 543-3952 |



Alissa Grenawalt  
4-H & Youth Development Agent  
N3150B Hwy 81, Monroe, WI 53566  
328-9440 [alissa.grenawalt@ces.uwex.edu](mailto:alissa.grenawalt@ces.uwex.edu)

