

This form can be filled out on your computer. It is set up in tables in Word. To move through the form just use your arrow keys or mouse. You can move in a table with the tab key but not from table to table. Click on Tables, then show/hide gridlines to set your preference for viewing.

12/2009

**Colorado 4-H Shooting Sports State Team Member
Application/Registration Form**

Return completed application to the State 4-H Shooting Sports Coordinator

Your shooting sports coordinator is: Deadline for Colorado Applications: Jan 10th 2010	<i>(Insert the contact information for your state 4-H Shooting Sports Contact here)</i> Jim Hamilton 4-H Shooting Sports and Natural Resources Program Coordinator, 1016 Arizona Ave, Trinidad CO 81082 Phone: (719)846-7403 E-mail: jim.hamilton@colostate.edu
--	--

Name: Mr. Ms. Mrs. _____

Street Address: _____

City: _____ State: _____ Zip: _____

County: _____ Home Phone: _____

Business Phone: _____ Fax Number: _____

Cell Phone: _____ E-mail: _____

Gender (please check) Female Male Special Diet Needs: _____

Please rank your first, second, and third choice of discipline area (*note: you will participate in only one discipline throughout the entire week long training*):

_____ Archery

_____ Pistol

_____ Rifle

_____ Shotgun

_____ Hunting

_____ Black Powder/Muzzle Loader

_____ Coordinator

_____ Re-loading

_____ Advanced Shotgun (Pre-Requisite: Must be state-certified in basic shotgun and have at least two years experience teaching shotgun in a 4-H program at the county or state level. Must have prior approval from State Coordinator.)

I understand that if I attend this workshop, I will assist with at least one state level 4-H Shooting Sports Training workshop for leaders in my state each year for the next three years.

Signature of Applicant

Signature of Extension
Director/or designee

Experience with 4-H or Other Youth Organizations

Please describe your experience working with youth through 4-H, Scouts, or similar organizations.

Previous Shooting Sports Training

List your previous shooting sports training received, and any certification you have received.

Discipline	Training Received	Date	Certification Level

Shooting Background

Do you have hunting experience? Yes No Number of Years

Types of Hunting:	
Specialized Training:	
Honors/Recognition:	

Competitive Experience

Do you have competitive experience? Yes No Number of Years

Disciplines:	
Past/Present Classifications	
Specialized Training:	
Honors/Recognition:	

Community Activities

Please list your participation in community activities and organizations, and offices or leadership positions held.

Organization or Activity	Offices/Leadership Positions Held	Honors/Recognition

Hobbies/Other Interests

Describe any other interests, skills, or hobbies you enjoy.

References

Please list two references who will endorse your qualifications.

Name	Address	Phone

In order for an individual to become a State Team member and attend a National training , he/she must meet the following guidelines: And those noted in the State Policy and Procedures

- 1. Have state level certification in the discipline in which they are enrolling.**
- 2. Have a minimum of two years of experience in the discipline they are enrolling in**
- 3. Have interest in 4-H and youth development.**
- 4. Endorse the train-the trainer concept in basic shooting skills.**
- 5. Have current 4-H Volunteer status or Extension Faculty status in their state.**
- 6. Must be recommended by the respective State 4-H Shooting Sports Coordinator.**