

Date _____

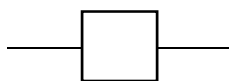
Club Shooting Sports discipline(s):

Archery ____ Hunting Skills ____ Muzzleloading ____ Pistol ____ Rifle ____ Shotgun ____

Western Heritage Program ____

Club name: _____

Primary Certified 4-H Shooting Sports Leader:



SUPERVISION

All 4-H Shooting Sports activities will be organized and conducted with at least one Certified 4-H Shooting Sports Leader present.

RECORDS

1. Only enrolled 4-H members ages 9 to 19 (certain restrictions apply) will participate in the activities of this club.
2. The Planned sections of the Alaska 4-H Club State Shooting Sports Activity Planning and Reporting Form (AK4HDEB0006) should be completed before club activities begin each year (Discretion of district 4-H staff).
3. The Alaska 4-H Shooting Sports Youth Participation Record AK4HDEB0005 will be used to ensure that:
 - A. youth do not participate in live fire until they have completed their:
 - i. 4-H member enrollment form,
 - ii. Official 4-H Health and Code of Conduct Form,
 - iii. Insurance form and payment, and
 - iv. Safe firearm handling lesson(s).
 - B. each session is noted by date on the Alaska 4-H State Shooting Sports Planning and Reporting Activity Form AK4HDEB0006 and youth present on that date are noted on the Youth Participation Record AK4HDEB0005
 - C. youth who miss lessons in a sequence are required to make up the material before proceeding with new material.

HEALTH AND SAFETY

Leaders will collect and confidentially review each participant's Health Statement on the Official 4-H Health and Code of Conduct Form at the time of enrollment. A copy of the health form will be provided by the district office for your club records. A copy of each youth and adult participant's Official 4-H Health and Code of Conduct Form will be present at each activity or event.

EMERGENCY PHONE NUMBERS

Ambulance _____ Fire _____

Sheriff _____ Poison Control Ctr. _____

Emergency Room _____ Urgent Care Ctr. _____

Person responsible to call _____

Notes:

CONTACT IMMEDIATELY

1. District 4-H faulty: _____
(Name/Phone)

(If district 4-H staff is not available)

2. Secondary Contact: _____
(Name/Phone)

3. State Coordinator: S. Todd Williver 541-815-1515
(Name/Phone)

4. The parent(s) of the youth(s) involved will be contacted by:

(Name/Phone)

FIRST-AID

1. It is advisable to have one person with current 1st Aid and CPR certifications present at all club activities.
2. A first-aid kit will be present at all club activities. Contact your Red Cross for information on what to include in the kit.
3. The first aid kit will be checked for supplies and re-stocked as needed at each club activity.

SAFETY EQUIPMENT

1. Eye and ear protection will be worn by all participants, leaders and observers whenever there is live fire of powder, rim fire or center fire ammunition.
2. Air rifle and pistol participants, leaders and observers will wear eye protection when there is live fire.
3. Archery participants, leaders and observers may be required to wear eye and ear protection when the archery range is located near to a gun range when there is live fire.

MINIMIZATION OF LEAD EXPOSURE

No persons will eat or drink until washing hands after being on the range. If water is not available leaders will provide anti-bacterial moist towel-lets, water-less soap, or similar product for wiping hands once shooting has concluded.

ADDITIONAL HEALTH & SAFETY NOTES SPECIFIC TO OUR PROGRAM/ SITE

Property Use

Written permission has been secured to use the

(name/address)

for meetings and live fire exercises of this 4-H club. Responsibility for the following items has been determined:

1. Drinking water
2. Evacuation of the site in an emergency
3. Fire extinguisher(s)
4. Garbage collection and removal
5. Toilet facilities and maintenance
6. Telephone/ Emergency communications
7. Back up communications
8. Utility (electricity, gas, water, telephone, sewage) Emergency shutdown locations and procedures

Site Hazards

A safety inspection of the range will be completed before the club meets for the first time each year and throughout the year as needed. Safety procedures (signage, berms, and safety lines) will be reviewed with the site owner. All hazards, both natural and man-made, will be identified and eliminated or reduced.

Transportation

Club leaders and parents will follow district and state guidelines when volunteers provide transportation to 4-H club members as part of a 4-H club activity.

Missing Persons

In the event that a person(s) become missing from an activity the following minimum steps will be taken (Use an additional sheet to explain a more detailed plan):

1. Determine number of people missing. Make note of the time.
2. Question those who saw person(s) last, were they alone or with someone?
3. A team of two people will search the immediate area.
4. Notify law enforcement officials.
5. Notify district 4-H staff.
6. Notify the parent(s) of the youth(s) involved.
7. While the search is taking place, the other youth and parents will remain as a group at the site or return home at the direction of the district 4-H staff or law enforcement officials.

WEATHER AND ENVIRONMENTAL AFFECTING PROGRAM ACTIVITIES

1. When the temperature goes above _____ degrees, activities will be changed as follows:

2. When the temperature goes below _____ degrees, activities will be changed as follows:

3. Additional weather or environmental conditions (i.e. thunderstorms) may affect program activities in our area and how the activities are carried out.

DISASTER EMERGENCIES

These may include, but are not limited to, fire, explosion, lightening, wind storm, flood,

ALASKA 4-H SHOOTING SPORTS ACTIVITY PLANNING AND REPORTING

AK4H-DEB-0006

Club name: _____ District: _____

	Leader #1	Leader #2	Leader #3
Name			
Phone			
Shooting Discipline			
Date of Certified 4-H Shooting Sports Leader Training			

The Planned sections of this form are to be completed and sent to the district 4-H staff before club activities begin each year (October 1). Attach Additional sheets if necessary.

The Reporting sections of this form are to be completed through-out the club year. Use as many copies of the form as necessary to make an accurate record. The completed form is to be sent to the district 4-H staff at the end of each 4-H year (September 30). Attach Additional sheets if necessary.

Date	Activity or Training Planned	Refer		

ALASKA 4-H SHOOTING SPORTS CUSTODY / TRANSFER OF FIREARMS FORM

AK4H-DEB-0007

INSTRUCTIONS

1. Please print, using ink or type
2. Fill out in duplicate for each transfer
3. Keep an original copy for personal records and a duplicate for 4-H program files
4. If an error is made while filling out this form, do not destroy. Keep the copy in your files.
Repeat the process using a new form.

Custodian or Transferor Name and Address	Transferee Name and Address		
	place		
Date of Custody or Transfer (Month, Day, Year)	Time of Transfer		
	Time:		AM
City/Town where Custody or Transfer took place			

