ROCK COUNTY SHOOTING SPORTS
12TH ANNUAL STATE 4-H INVITATIONAL
BELOIT RIFLE CLUB, BELOIT WI
JUNE 18, 2005

DUE: JUNE 3, 2005

Registration: 9:00 – 9:30 AM; Competition will begin at 10:00 AM **Rain or Shine**

SAFETY GLASSES AND HEARING PROTECTION REQUIRED. HUNTER SAFETY CERTIFICATION REQUIRED for all powder-burning events (.22 rifle, shotgun, muzzleloading).

Cost: $6.00 1st event; $5.00 2nd event; $4.00 3rd, 4th & 5th event
Make checks payable to: **Rock County Shooting Sports**

Name 4-H Age

Address Phone ( )

City State Zip

County 4-H Club

Check event(s) you wish to participate in.

Junior Division (8-11)

___ Sporter .177 Pellet Air Rifle
___ Freestyle .177 Pellet Air Rifle
___ *Air Silhouette .177 Pellet Air Rifle
___ Wildlife (**All participants) No Charge**
___ Archery Bare Bow
___ Archery 1 Shooting Aid
___ Archery 2 or more Shooting Aids

Team events will be announced later.

Intermediate Division (12-14)

___ *Air Silhouette .177 Pellet Air Rifle
___ Sporter .177 Pellet Air Rifle
___ Freestyle .177 Pellet Air Rifle
___ Trap Shooting
___ Silhouette Iron Sights
___.22 cal Rifle
___ Archery Bare Bow
___ Archery 1 Shooting Aid
___ Archery 2 or more Shooting Aids
___ Muzzleloading
___ Silhouette Scope (10x Max.)
___ Wildlife (**All participants) No Charge**

Senior Division (15-18)

___ Sporter .177 Pellet Air Rifle
___ Freestyle .177 Pellet Air Rifle
___ *Air Silhouette .177 Pellet Air Rifle
__ Trap Shooting
___ Silhouette Iron Sights
___.22 cal Rifle
___ Archery Bare Bow
___ Archery 1 Shooting Aid
___ Archery 2 or more Shooting Aids
___ *Air Pistol .177
___ Muzzleloading
___ Silhouette Scope (10x Max.)
___ Wildlife (**All participants) No Charge**

___Top Gun Competition $6.00 – 4-H'er and Adult – Silhouette (Separate Trophy)

Amount enclosed: $_____

***Permission Statement*: I grant** permission for my child to participate in this Invitational. **I release** Rock County, their employees, UW Board of Regents, U-W Extension (hereinafter University), employees, and volunteers from any financial responsibility for sickness or accident while in attendance**. I agree** to pay all expenses including medical expenses not covered by insurance**. I authorize** the use of photographs or videos of my child, my family, and myself while participating in this tournament for educational or media purposes. **I grant** the UW Board of Regents and UW-EX (hereinafter University) the right to use, publish, and copyright my image (including audio, moving image, or photograph) for educational programs, websites, and promotion of University programs.

_____ _____
Shooter Signature Parent Signature

Shooter's Hunters' Safety Certificate Number _____

Return to: Kevin Shull, 6903 NB Cty Rd Y, Milton WI 53563-9487; Questions: Dennis (608) 365-7873, Ron (608) 876-5485, Kevin (608) 868-7699