## Archery Registration Form 2020 Tri-County 4-H Invitational

Friday, April 17, 2020 4:00 - 9:00 PM and <u>Saturday</u>, April 18, 2020 6:30 AM - 5:00 PM Washington County Fair Park, 3000 Hwy. PV, West Bend, WI (Hwy 45 South of West Bend)

Indoor archery events: Archers are limited to four different archery classes in the same age division and four different air rifle classes in the same age division. <u>Each participant receives one Tri-County T-shirt</u>. To be eligible to take part in this tournament you must be registered as a Wisconsin 4-H Shooting Sports archery project member as recognized in your county. <u>Register early or take what is left for shooting times</u>.

Indicate your class and 1<sup>st,-</sup>2<sup>nd</sup>-3<sup>rd</sup>-4<sup>th</sup> choices for shooting times. NO EQUIPMENT CHANGES OR CLASS CHANGES. NO SHOOTING TIME CHANGES OR THE ORDER OF SHOOTING YOUR CLASSES. NO REFUNDS.

<u>Circle event</u> to be used for team competition or the first event entered will be used for your team score.

1 <sup>st</sup> Class Code	_Time: Friday: 5:00 PM	6:308:00	_; Saturday:	7:00 AM	8:30	10:00	_11:30	_1:00 PM
2nd Class Code	Time: Friday: 5:00 PM	6:308:00	_; Saturday:	7:00 AM	8:30	10:00	_11:30	_1:00 PM
3rd Class Code	Time: Friday: 5:00 PM	6:308:00	_; Saturday:	7:00 AM	8:30	10:00	_11:30	_1:00 PM
4th Class Code	Time: Friday: 5:00 PM	6:308:00	_; Saturday:	7:00 AM	8:30	10:00	_11:30	_1:00 PM

We will try to schedule your times as requested. We cannot guarantee your choices as they will be scheduled in the order the registrations are received. SO MAIL EARLY. \*\*\*\*\*\*You are required to email or call us to confirm your shooting times after April 8, 2020 \*\*\*\*\*\*\*

Mark your Age Division:	1 <sup>st</sup> Archery Class \$9.00			
Junior (8yr+3rdgr11 yr) -10 yds.           Intermediate (12-14 yr) - 15 yds.         4-H National Qualifying Opportunity (13 mi           Senior (15yr - 1 yr/f/hs) - 20 yds.         4-H National Qualifying Opportunity           Choose your classes.         Recurve           Write 1, 2, 3, or 4 in the appropriate class.	in.) 1st Archery Class when entered in Air Rifle \$7.00 2 <sup>nd</sup> Additional Archery Class \$6.00			
Bare Bow	3rd Additional Archery Class       \$6.00         4th Additional Archery Class       \$6.00         (NO REFUNDS)       Total:			
Longbow w/o nock & w/o arrow shelf      LBWO         Longbow - any combination of shelf or knock      LBWO	<ul> <li>All signatures are required or form will be rejected.</li> <li>No equipment changes or class changes or shooting time changes are allowed. Make sure you understand</li> </ul>			
See the 4-H web site for more details on wildlife contest topics:	<ul> <li>time changes are allowed. Make sure you understand this rule.</li> <li>Your division is determined by your birthday as of the first day of this event. Archer may register in next older age division on this form only. Your entry age division must be the same in all classes throughout the tournament. EXCEPT National 4-H Qualification.</li> <li>You must review the tournament rules before completing this registration form. Tournament rules and safety rules are available from your leader or on the State 4-H/Shooting Sports website at: http://fyi.uwex.edu/wi4hshooting sports/</li> <li>I request physically challenged accommodations. Please define on the reverse side.</li> <li>I certify that this "archer" is currently enrolled in the 4-H Archery Project, understands the archery safety rules, has reviewed the tournament rules, has the correct equipment, and is entered in the correct classes and the order of shooting classes.</li> <li>4-H Certified County Archery Leader or 4-H Youth</li> </ul>			
Each PARTICIPANT receives only one Tournament T-Shirt. Adult sizes: Small Medium Large X Large XX L	Development Educator Signature Ph # ++ An incomplete registration form will not be accepted. ++			
REGISTRATION DEADLINE: Postmarked Saturday, March 28, 2020.				
NameBirth Date Address City State Zip	AgePhone			

Name	Birt	h Date	_Age	_Phone	
Address	City	, State, Zip			
4-H Club 0	County	E-ma	il		

*Permission Statement*: I grant permission for my child to participate in the Tri County 4-H Invitational and related activities. I release the Washington County Agriculture and Industrial Society & Washington County Fair Park, their employees, UW Extension employees, volunteers, and donors from any financial responsibility. I agree to pay all expenses not covered by insurance. I authorize the use of photographs of our family at this event for educational or media purposes. I have read, understand, and will abide by the tournament/contest rules regarding participation.

Signature: Parent/Guardian	Date	Participant's Signature
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Total fees:	Check Number	Make checks payable	e to:	Washington County 4-H Shooting Sports
Mail to: Barb/No	orb Yogerst, 2401 Western Avenue,	Jackson, WI 53037	PH:	262-677-2379
EM: washingtone	co4hshootingsports@gmail.com			

Please return this form with payment. Keep a copy for your records.