



2024 MCCRACKEN COUNTY 4-H HOT SHOTS

PRACTICES WILL BEGIN THE WEEK OF APRIL 9

Pistol	Tuesday	5 PM
Rifle	Thursday	5 PM
Archery	Thursday	5 PM
Trap	Thursday	5 PM

MCCRACKEN COUNTY 4-H BENEFIT MATCHES

Saturday, June 29

Saturday, August 24

All disciplines plus buddy matches.

Food Truck will be on-site.

MCCRACKEN COUNTY FUN SHOTS

Saturday, June 1 "Shoot with a Cop" from 8 a.m. to noon

Thursday, September 12 at 5 p.m.

STATE SHOOTING COMPETITION – TBD IN EARLY SEPTEMBER

4-H HOT SHOTS SHOOTING SPORTS CLUB

Shooting Sports -It is our mission to provide a safety-oriented, educational shooting for the youth of McCracken County through the use of firearms as tools for teaching safe firearm handling, responsibility, respect, self-discipline, and recreational opportunities. Through this program, we will be able to help youth develop life skills, increase their knowledge, and acquire a wholesome attitude toward themselves and others.

Other goals of this program are:

- To promote the highest standards of safety, sportsmanship, and ethical behavior.
- To encourage participation in natural resources and related natural science programs by exposing participants to the content through shooting, hunting, and related activities.
- To enhance the development of self-concept, character, and personal growth through safe, educational, and socially acceptable involvement in shooting activities.
- To expose participants to the broad array of vocational and life-long avocational activities related to shooting sports.
- To strengthen families through participation in life-long recreational activities.
- To complement and enhance the impact of existing safety, shooting, and hunter education programs using experiential educational methods and progressive development of skills and abilities.

FREQUENTLY ASKED Q&A

- **What is the McCracken County Hot Shots 4-H Club?** The McCracken County Hot Shots 4-H Club is a shooting sports education program that is sponsored by the McCracken County Extension Office using the University of Kentucky Cooperative Extension Service 4-H Shooting Sports Education Program. The program believes that:
 - Youth development is the number one goal of the Shooting Sports Education Program
 - It provides an effective tool for human growth and development for youth and adults.
 - It is an introduction to the safe and responsible use of firearms and archery equipment, a valuable life skill. The program trains youth to handle and shoot firearms safely. It teaches leadership and responsibility in a nonformal environment while offering fun activities for youth and adults. While competition is not the main focus, the program does offer opportunities to participate in shooting events, competing in various disciplines and age groups.
- **What disciplines are offered?** Currently, we offer four disciplines:
 - Trap (shotgun)
 - Rifle (.22, air, bb)
 - Pistol (air and .22 caliber)
 - Archery
- **Am I allowed to participate in more than one discipline?** First-year members can choose up to two disciplines and returning members can choose as many as they are able to attend practices for.
- **Where are practices held?** Practices are held at the range at Shooters Supply on Cairo Road throughout the week.
- **What is the “season” that the youth participate in?** We plan on starting practice at the beginning of April. 4-H matches are held during the summer with dates TBD, until the state match, which is held towards the end of September. We ask that each youth participate fully from April - September.
- **Who is allowed to join?** Any youth that lives in McCracken County (or that attends a school in McCracken County). Youth must be between the ages of 9-19 to be able to participate.
- **What if I live outside of McCracken County?** If you reside outside of McCracken County, you must meet one of the following requirements:
 - Must attend school in McCracken County
 - If the county you live in doesn't offer the program or the discipline you are interested in, youth are able eligible to join the program.
 - Although, priority will be given to McCracken County residents if a discipline has a limited number of spots.
- **How much does it cost to join?** The dues for 2024 are \$65.00. Checks and exact cash are accepted. Make checks out to McCracken County 4-H Council
- **Will there be any other costs?** We have been very lucky to have great sponsors such as the National Rifle Association to help pay for needed supplies. However, members will have to bring their own shells or purchase shells at the range.

- **What do the fees go towards?** The 4-H dues go to help pay for needed expenses such as equipment, range improvements, and registration fees for the state shoot competition.
- **What are the COVID-19 Guidelines?** We will defer to the most recent masking guidelines for the McCracken County School System as per the University of Kentucky guidelines. Currently, masks are optional both indoors and outdoors for 4-H members. Guidelines are subject to change.
- **Are there volunteers that help teach the youth?** Yes! Each discipline has certified volunteers who were required to pass Youth Protection Standards set by the University of Kentucky, pass a background check, and agree to civil rights standards that do not discriminate against race, color, age, sex, religion, national origin, and disability along with completing Kentucky 4-H Shooting Sports Education Program training in their disciplines.
- **As a parent, am I allowed to help?** Yes! The 4-H programs would not be where they are without volunteers! There are many areas in which you may contribute your time. We always need volunteers to help promote events, fundraising for the group, and event planning for the matches. We need the youth's parents to help at the local matches with registration, scoring targets, and other duties. Also, if your child attends the State Shooting Sports Competition, you will be responsible for volunteering to help for a minimum of 2 hours.
- **Am I allowed to directly help the youth on the range?** Please contact Rachael Davis and the discipline coach for more details. A volunteer application is required, allowing passing a background check, and youth protection standards set by the University of Kentucky.
- **How do I become a coach?** We are always looking for new coaches in each discipline, as well as expansion of future programs. Please contact the extension office for more details. Certifications are in the spring and fall.
- **How will I know if practices are canceled due to the weather?** We use the TeamReach app to send out notices about canceled practices and other news about the team. See the TeamReach section of the packet on how to install it. If you do not want to install the app, we also send out emails via 4-H online.



We use TeamReach to send out notices about practices and other news related to the team. It is also used for 4-H camps and other 4-H programs within McCracken County.

To install:

- **Locate TeamReach on your App Store phone.**
- **You will be asked to join a group with code.**
- **Enter Group code: 20194**



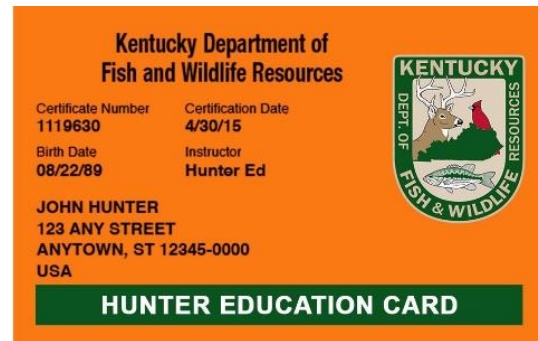
**on your cell
a group**

*Standard text message rates apply.

Free, Easy, and saves time.

TeamReach is designed to simplify life for everyone involved. The team(group) has a central place for all communication, and this eliminates the need for phone calls, emails, and handouts. By the way... it's FREE.

Get your Orange Card for Free



Does your youth need/want to get their Orange Card for Hunter's Ed?

We are partnering with Courtney Goodman at the Department of Fish and Wildlife Resources to get Orange Cards for our members.

1. The classroom portion can be finished online at nra.yourlearningportal.com.
2. The range portion will be completed while at practice at Shooter's Supply Shooting Range with the 4-H instructors. Courtney will watch the youth shoot and provide hands-on instruction when needed.

If you have questions about this, please contact Rachael Davis by emailing rachaeldavis@uky.edu or calling the office at 270-554-9520.

2024 MCCRACKEN COUNTY 4-H HOT SHOTS SHOOTING SPORTS CLUB



Name: _____

MEMBER REGISTRATION

Dues: \$65.00

Debit/Credit Cards accepted in office (no phone transactions)

Please make checks payable to:

McCracken County 4-H Council

Please put your child's name on the memo

OR

Register on-line at:

<https://mccracken.ca.uky.edu/4h-youth-development>

**Online or paper registrations are due to the McCracken County
Cooperative Extension Service by Monday, April 1st**

*(There is a locked drop-off box on the right side of the main front door
if you cannot get to the office during office hours)*

Trap participants will have to bring their own shells or purchase shells at the range.

NO RELOADS ALLOWED

Staff Use Only

Dues Paid _____

2024 4-H HOT SHOTS ENROLLMENT

Date: _____

New: _____

Returning: _____

First Name: _____ M: _____ Last Name: _____

Address: _____

City: _____ State: _____

Zip: _____ Phone: _____ - _____ - _____

Email: _____

Age: _____ (*Child MUST BE 9 As of January 1, 2024 NO EXCEPTIONS*)

T-Shirt Size: (*Choose one*)

Youth

____ S ____ M

____ L ____ XL

Adult

____ S ____ M

____ L ____ XL

____ XXL

Rank **up to** four disciplines:

- Rank disciplines 1 (first choice) up to 4 (last choice)
- ***Only rank disciplines you are interested in.***

_____ Rifle

_____ Pistol

_____ Shotgun

_____ Archery

****** Please note that for Rifles and Pistols, there is a limit of 20 participants for each with priority given to returning members. ******

PERMISSION TO PARTICIPATE

MCCRACKEN COUNTY HOT SHOTS 4-H SHOOTING SPORTS CLUB

I give permission to my child, _____ to participate as a member of the Hot Shots 4-H Shooting Sports Program from 1/1/24 to 12/31/24.

I am also aware that as a parent/guardian, **I will be responsible for volunteering for at least 2 local matches.** If my child participates in the Kentucky State Shoot in September, I will be responsible for volunteering for a minimum of 2 hours.

I understand my Child will be handling a firearm including, but not limited to pistols, rifles, shotguns, and bows. The shooting sports program, as part of the overall 4-H program, is designed to teach Shooting safety, build relationships with peers, learn to cooperate, develop leadership skills such as poise, confidence, and teach others. They also learn to work with adults, appreciate the abilities of others, and develop a sense of pride in their community. Involvement in the Shooting Sports program will lead to contact with other individuals, both adults and youth who have different levels of experience handling firearms and different sets of personal values. I understand that participating in the 4-H Shooting Sports program is voluntary and is not required to be a 4-H member.

I am aware of and have discussed with my child that:

- a. Shooting may result in a personal injury or could cause injury to another person if safety rules are not followed.
- b. Other participants may act in a negligent manner which otherwise may result in harm to my child.
- c. While being transported by van to offsite competitions or events, my child may be involved in a collision with another automobile, person, animal, or object which may result in harm to my child.
- d. Shooting may result in injury or accidental death from hazards arising from firearms equipment.
- e. Certain risks associated with outdoor activities could occur, including but not limited to, contact with poisonous plants, stinging insects, wild animals, or reptiles.

I recognize that the above-outlined activities and potential resulting risks may cause harm, accident, loss, injury, or death to participants or other persons in the immediate vicinity. I have discussed with my child the importance of following directions and prescribed safety procedures, which will be outlined by the 4-H professionals and/or trained volunteers prior to and during the activities. I have also advised my child to follow all posted directions and instructions at the firing range and during any activity there. I understand that my child is not required to participate in this activity but grant permission for him/her to do so despite the possible risks. I recognize that by participating in this activity, as with any physical activity, my child may risk potential injury. I hereby attest and verify That I Have been advised of the Potential risks, that I Have full knowledge of the risks involved in this activity, and that I assume any expenses that may be incurred in the event of a loss, an accident, illness, or other incapacity, regardless of whether I have authorized such expenses.

Parent/Guardian's Signature

Date

4-H Member's Signature

Date

4-H Participant Information/Enrollment Form (NOT FOR RESIDENTIAL CAMP)

Note: The form must be completed by the participant and/or parent or guardian in order to participate in the 4-H program. **All items must be completed, even if the response is not applicable – indicate by using N/A (i.e. no health insurance).** Failure to complete this form in its entirety will result in the person being ineligible to participate in 4-H activities. Please print in blue or black ink to allow for photocopying.

Name: _____ County/Area: _____
 Preferred Name: _____ School Name: _____
 Address: _____ Birth Date: _____ Age: _____
 City: _____ State: _____ Zip: _____ Grade: _____
 4-Her Phone: _____ 4-H Year: _____ Gender: Female Male
 4-Her Email: _____
 Residence:
 Farm Town < 10,000 or Rural Non-Farm Town/City/Suburb 10,000-50,000 City/Suburb >50,000 City– Central >50,000
 Race (please choose more than one if applicable): American Indian Asian Black Native Hawaiian or Pacific Islander
 White Prefer Not to Say Not Listed: _____
 Ethnicity: Hispanic Non-Hispanic T-Shirt Size: _____

Parent/Guardian 1: _____ Phone number: _____
 Email: _____ Emergency Contact? Yes No
 Parent/Guardian 2: _____ Phone number: _____
 Email: _____ Emergency Contact? Yes No

Is any member of your family a current or former member of the United States Military or National Guard? Yes No

Health History

Does the participant have, or at any time has had, any of the following? Check "Yes" or "No" to each item. Please explain any "yes" answers (noting the number of the item) in the space below or on an additional sheet if necessary. Reporting conditions will not prevent a person from attending and will be kept confidential.

- | | Yes | No |
|---|--------------------------|--------------------------|
| 1) Serious Allergy to Insects..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 2) Serious Allergy to Dairy | <input type="checkbox"/> | <input type="checkbox"/> |
| 3) Serious Allergy to Gluten..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 4) Serious Allergy to Nuts..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 5) Other Allergy (please explain)..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 6) Drug Allergy (please explain)..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 7) Food Allergy (please explain)..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 8) Asthma..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 9) Bronchitis..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 10) Convulsions..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 11) Diabetes..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 12) Ear Infection..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 13) Fainting..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 14) Headaches..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 15) Hypoglycemia..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 16) Other Conditions (please explain).... | <input type="checkbox"/> | <input type="checkbox"/> |

Please explain any "yes" responses, including medications taken for any conditions:

Please explain any restrictions (dietary, physical, etc):

Social, emotional, and/or behavioral health information:

The following over the counter medications may be administered to my child without contacting me:

Acetaminophen(Tylenol) Antihistamines Dramamine Ibuprofen (Advil)
 Antacid Decongestant Hydro-cortisone Polysporin (topical antibiotic)
 Cream

Medical Treatment

All information provided on this form is correct and complete to the best of my knowledge. This person has permission to engage in all events and activities. I hereby give permission to the event designee to provide routine health care, administer prescription and over the counter medications as noted and seek emergency medical treatment if warranted. I agree to the release of all records necessary for medical treatment, billing, or insurance. In the event I cannot be reached in an emergency, I give permission to the attending physician to secure and administer treatment, including hospitalization.

SIGNATURE OF PARENT/GUARDIAN: _____ **DATE:** _____

Publicity Release

I hereby grant the 4-H program, University of Kentucky and their agents, the right to use, reproduce, assign and/or distribute still pictures, video and sound recordings of myself or my minor child without compensation for use in promotion, advertising, educational publications or online content.

SIGNATURE OF /GUARDIAN: _____ **NO, I do not permit**

4-H ENROLLMENT FORM

4-H Youth Development CODE OF

CONDUCT FORM (NOT FOR RESIDENTIAL CAMPS)

All 4-H members and family/friends associated with 4-H members must respect the individual rights, safety and property of others and adhere to this Code of Conduct. A 4-H member may be prohibited from participating in a specific event/program if the participation by the individual poses a danger to the 4-H member and/or others. The following guidelines are designed to make all 4-H events safe, meaningful, and satisfying to youth and others attending.

WHILE ATTENDING ALL 4-H MEETINGS, PROJECTS, PROGRAMS, ACTIVITIES AND EVENTS:

1. Each 4-H participant is expected to attend all planned sessions, workshops, field trips, and meetings of the event, and to be in appropriate attire. Dress codes will be specific to individual events. Delegation chaperones and/or volunteers are responsible for ensuring that members participate in all aspects of the planned program activities.
2. The possession and use of alcoholic beverages, tobacco products, vape juice and/or devices, and/or drugs (except for medications prescribed to the participant by a licensed physician) are prohibited. Delegation chaperones and/or volunteers shall limit use of tobacco products to designated areas.
3. Possession of firearms not for educational use is prohibited.
4. Setting off fire alarms and tampering with fire extinguishing and other emergency equipment are prohibited.
5. Gambling of any type is prohibited.
6. Respect toward others and facilities shall be demonstrated. Bullying, harassment of others or destruction of property shall not be tolerated. Bullying and harassment can include the use of social media.
7. Obscene, discriminatory and/or inappropriate language, roughhousing, and insubordination are prohibited at all times.
8. Display of overly affectionate or inappropriate attention between participants is prohibited.
9. Technological equipment (including but not limited to cell phones, laptops or mp3 players) shall not interfere with the program and may not be allowed in certain situations.
10. All clothing shall be acceptable in repair and appearance and shall be worn within the bounds of decency and good taste as appropriate for 4-H events. Articles of clothing which display profanity, products, or slogans which promote tobacco, alcohol, drugs, sex or are in any other way distracting, are prohibited. *Each county may adopt additional Code of Conduct guidelines.*

WHILE ATTENDING OVERNIGHT CONFERENCES, CAMPS, AND EVENTS, THE FOLLOWING WILL ALSO APPLY:

1. All participants are to be in their assigned area at curfew and comply with quiet hours, lights out, and other rules of the event.
2. No member or volunteer may leave the grounds without the permission of the conference director or adult in charge. An adult shall accompany a 4-H member any time they leave the grounds. Adults shall notify another adult in the delegation before leaving the grounds.
3. At overnight events, only conference participants may be in sleeping areas. Lounges or common areas may be used only for working committees and social activities.
4. Room service such as phone calls, food, laundry, or others shall not be permitted without chaperone permission.

Any violations of this Code of Conduct shall be reported promptly to the adult in charge of the delegation/program and to the person in charge of the event. The person in charge of the event shall have the final responsibility for disciplinary action. **Failure to comply with the Code of Conduct by 4-H'ers and family/friends associated with the 4-H participant may result in penalty including, but not limited to, the following:**

- Sent home from the activity or event at his/her own expense
- Barred from participation from future 4-H events
- Assessed the cost of damages for destruction of property

In the event I received a scholarship or financial assistance to an event and can no longer attend, I am responsible for notifying my 4-H Agent one week prior to the event and/or finding my own replacement. Failure to communicate with my 4-H Agent may result in becoming ineligible for future scholarships and any money paid by participant may be forfeited.



I, _____, _____ have read the Code of Conduct and agree to abide by its rules. By signing this document, I acknowledge that infraction of this Code of Conduct will result in any or all of the penalties listed above.

County:

Date:

Please bubble the clubs you are interested in below. Placing a check only indicates your interest in the club. We'll send information out about clubs/activities to those who indicate interest once they are ready to begin. Once you have returned this enrollment form you may begin attending meetings. To become a member you must attend a club meeting. 4-H Age is 9-18 as of January 1, 2024 and Clover Buds are for ages 5 to 8 as of Jan. 1, 2024.

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Member/Volunteer

Parent/Guardian

Cooperative Extension Service

Agriculture and Natural Resources
Family and Consumer Sciences
4-H Youth Development
Community and Economic Development

MARTIN-GATTON COLLEGE OF AGRICULTURE, FOOD AND ENVIRONMENT

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University of Kentucky, Kentucky State University, U.S. Department of Agriculture, and Kentucky Counties, Cooperating.
Lexington, KY 40506



Disabilities accommodated with prior notification.