



## Washington State 4-H Shooting Sports Training WSU Extension - SW Washington Region

### **Training Disciplines Offered: Archery & Shotgun** (maximum of 15 participants per discipline)

This training and certification meets the educational training requirements to serve as a 4-H Shooting Sports instructor within Washington State. In accordance with state policies, 4-H Shooting Sports instructors at the county level **must**:

- Be 21 years of age (18 years old for assistant instructors),
- Be screened, trained, and appointed as a current 4-H Leader through their local County Extension Office.
- Be trained and certified for each discipline (Archery, Shotgun) that they will be teaching at the county level.
- Successfully complete a minimum of 11 hours of Extension approved/sanctioned instructor training, which includes a 3 hour online classroom session and 8 hours of face to face instruction, as scheduled below.

### **Training Information:**

#### **Saturday 3/2/19 - ONLINE Mandatory Training**

All training participants must participate in this online classroom session from 9:00am-12:00pm. (Join: <https://cccconfer.zoom.us/j/4764044452>)

#### **Saturday 3/16/19 - ARCHERY Training**

Location: Goldendale Primary School, Goldendale, WA 98620

Note: All equipment will be provided

#### **Sunday 3/17/19 - SHOTGUN Training**

Location: Private Address Goldendale, WA 98620 (address provided once registration is confirmed))

Note: All shooting-related equipment will be provided. Bring your own hearing protection.

### **Training Schedule for both days:**

8:30 a.m. - 9:00 a.m.	Registration
9:00 a.m. - Noon	Discipline Instruction
12:00 noon - 12:30 p.m.	Lunch (provided)
12:30 p.m. - 5:00 p.m.	Continue discipline instruction and recognition.

**Deadline:** Registration forms and fees must be received by Thursday, February 28th, 2019.

**Registration:** To register, participants need to fill out these forms and submit them to their local Extension Office. Once the paperwork has been received, Extension staff will verify that all pre-requisites have been met and will send a link to brown paper tickets to pay the registration fee online.

**Cost:** This includes facilities, instructors, printed materials, and lunch.

**Archery: \$35**

**Shotgun: \$50**

**Both Disciplines: \$75**

Note: If looking for a refresher but not certification, contact the Klickitat County Extension Office to reserve a seat for \$20.

\*Lodging Options are listed on the facility direction page and are not covered by the registration fee.

Your paperwork can either be dropped off to your local WSU Extension office or sent by mail to the following address: WSU Extension, 228 W. Main Street, MS-CH-12, Room 140, Goldendale, WA 98620. For a quick response please email scanned paperwork to [abby.brandt@wsu.edu](mailto:abby.brandt@wsu.edu) or fax them to 509-773-5707 AFTER completing them including your County Staff's signature.

*Cancellation Policy-* Cancellations will be allowed up until February 28, 2019. Please note that NO refunds will be given to those who register but do not complete the process and are ineligible to attend.

Extension Office Locations:

*Klickitat County*

228 W Main St #210  
Goldendale, WA 98620  
(509)773-2389

*Skamania County*

710 SW Rock Creek Dr  
Stevenson, WA 98648  
(509)427-3932

*Clark County*

1919 NE 78<sup>th</sup> Street  
Vancouver, WA 98665  
(564)-397-5710

For additional questions or information please contact Abby Brandt at [abby.brandt@wsu.edu](mailto:abby.brandt@wsu.edu) or 509-773-5817 ext. 7.

**IMPORTANT REMINDER:**

**All** instructors **must participate** in the online classroom session from 9:00am-12:00pm on Saturday, March 2, 2019. (Join: <https://cccconfer.zoom.us/j/4764044452>)

**Please be sure to fill out the following items & Submit to your local Extension/4-H Office :**

- Registration Form: \_\_\_\_
- Completed and Signed Health Form: \_\_\_\_
- Signed Release of Liability: \_\_\_\_



**Volunteer Registration Form:**

Washington State 4-H Shooting Sports Leader Training - WSU Extension Office & Off-Sight Location  
March 16 & 17, 2019

Name: \_\_\_\_\_ 4- H County: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

I am interested in (please mark as 1st & 2nd choice, if interested in both):

\_\_\_ **Archery Discipline Certification**

\_\_\_ **Shotgun Discipline Certification**

Do you have any previous certifications? \_\_\_\_\_

I am aware that I must attend the online classroom session, scheduled for Saturday, March 2<sup>nd</sup> from 9:00am-12:00pm in order to attend the on-site trainings. Please Initial to Verify: \_\_\_\_\_

Dietary Request/Restrictions: \_\_\_\_\_

Please check if you prefer Vegetarian meals \_\_\_\_\_ Other (food allergies, etc.) \_\_\_\_\_

Other Restrictions/Conditions: \_\_\_\_\_

**Requests for special accommodations need to be made to the registrar no later than Saturday, March 2<sup>nd</sup> 2019.**

\*Paperwork needs to be submitted to your local Extension Office for verification\*

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**County 4-H Coordinator Approval Required:** I verify that this volunteer has met all certification requirements to be a 4-H Project Leader.

County 4-H Coordinator/Faculty Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

County 4-H Coordinator/Faculty Staff Signature: \_\_\_\_\_

**Washington State 4-H Shooting Sports  
Klickitat, Skamania, & Clark County 4-H  
Adult Health Form**

**About This Form:** *Fill out the following information accurately, but please be concise. The form below is required for volunteers. Any information listed here may be shared with Washington State University faculty, staff, and/or certified 4-H Volunteer Leaders at your County Extension office's discretion. If you do not wish to share information about a health condition, please write "Prefer not to state". If you need a reasonable accommodation to participate in 4-H events and activities, please contact Missy Cummins at missy.cummins@wsu.edu or 360-397-6060, ext 5714, by March 2, 2019.*

Adult Participant Name: \_\_\_\_\_  
Birth date: \_\_\_\_\_ 4-H County: \_\_\_\_\_  
Home Address: \_\_\_\_\_ City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Emergency Contact: \_\_\_\_\_  
Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Allergies: \_\_\_\_\_  
Medication Allergies: \_\_\_\_\_  
Primary Doctor: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Do you have Insurance:  Yes  No  
Primary Insurance: \_\_\_\_\_  
Insurance Policy #: \_\_\_\_\_  
Insurance Subscriber: \_\_\_\_\_

**Emergency Medical Release**

In an emergency requiring medical attention or a situation reasonably believed to be an emergency by Washington State University (WSU) authorized agents including enrolled 4-H volunteers or event staff, I authorize WSU and its authorized agents to obtain emergency medical care for me. I will be responsible for any expenses incurred in so doing including, but not limited to, care by health care professionals, hospital care, and ambulance or other services. In addition, the health care provider has permission to obtain a copy of my health record from providers who treat me, and these providers may talk with the program's staff about my health status.

I hold harmless and agree to indemnify Washington State University, its authorized agents, and employees from decisions to seek emergency treatment.

Volunteer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**WSU Extension  
Klickitat, Skamania, & Clark County 4-H  
Release of Liability**

**RELEASE OF CLAIMS AND LIABILITY:** I RELEASE THE State of Washington, the Regents of WSU, WSU, any subdivision or unit of WSU, its officers, employees, and agents, from any and all liability, claims, costs, expenses, injuries and/or losses to person or property, which I may sustain and/or sustain as a result of death.

**I hold harmless and agree to indemnify Washington State University, its authorized agents and employees, and the event staff from decisions to seek emergency treatment.**

The undersigned acknowledges that the reaction to, possession of, and/or use of firearms is potentially dangerous, and involves risk of serious personal injury, death, psychological trauma, and/or other personal and financial liability. The undersigned agrees to assume all risk and waives any and all claims of liability against the facilities and/or property/land owners, for any personal injury, death, psychological trauma, and/or other personal or financial loss.

**I have carefully read this document, understand its contents, and am fully informed about this program and circumstances. I am aware that this document is a contract with WSU and the program sponsors. I sign it freely and voluntarily.**

**ASSUMPTION OF RISK:** I am the person whose name is set forth on this form. I understand that there are risks in participating in recreational activities and educational workshops at the SW Region Shooting Sports Leader Training. Risks in participating in this 4-H Event includes, but are not limited to: temporary or permanent muscle soreness, sprains, strains, cuts, abrasions, bruises, ligament and/or cartilage damage, orthopedic damage, head, neck or spinal injuries, eye damage, burns, or death. I also recognize that there are both foreseeable and unforeseeable risks of injury or death that WSU cannot specifically anticipate and list here. Further, I recognize that the actions of other participants in the activity may cause harm or loss to me or property.

Adult Participant (Please Print): \_\_\_\_\_

Signature of Adult Participant: \_\_\_\_\_ Date: \_\_\_\_\_

**Image and Recording Consent:** I understand that, unless noted below, photos, video, or audio recordings made of me at 4-H can be used for publicity or evaluation purposes.

\_\_\_\_\_ Yes, I agree

\_\_\_\_\_ No, do not use photo, video, or audio recordings made of me

## Shooting Sports Training: Additional Information

**Locations:** Addresses will be shared with registered participants prior to the training dates.

- **Saturday 3/16/19 – Archery Training** (8:30am-5:00pm)  
Goldendale Primary School, Goldendale, WA 98629
- **Sunday 3/17/19 – Shotgun Training** (8:30am-5:00pm)  
Private Residence, Goldendale, WA 98629



### LODGING & ACCOMODATIONS IN GOLDENDALE:

The Ponderosa Motel

775 E Broadway St, Goldendale, WA 98620

(509)773-5842

<https://www.ponderosamotelgoldendale.com/>

Quality Inn

808 E Simcoe Dr, Goldendale, WA 98620

(509)773-5881

<https://www.choicehotels.com/washington/goldendale/quality-inn-hotels/wa178?source=gyxt>

\*The Klickitat County Fairgrounds may be available for tent or RV camping. Contact the 4-H Office if this option appeals to you more

\*Peach Beach down on the Columbia River also offers dry and wet camping. Visit

<https://peachbeachcamping.com/> for rates and reservation information

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Lunch will be provided at both trainings, please plan accordingly for your own breakfast and dinner. Goldendale has a grocery store and a number of restaurants to meet your needs. More information about the town of Goldendale can be found at <https://www.goldendalechamber.org/>