## **Ingham County 4-H Shooting Sports**

**Annual Rifle Project Participation Form** 

Shooter's Name:	4-H Age Beg. Jr. Sr.		
4-H Club Name:	Date Started Course:		
Certified Rifle Instructor's Name:	Phone:		
Equipment Used:			

Rifle Knowledge Requirements	Completion Date	Shooter's Initials	Instructor's Initials	Comments
Safe Gun Handling Rules				
(Any time a gun is handled.)			]	
Parts of the Rifle				
and their functions				
Types of Rifle Actions				
& their operations				
Ammunition Basics				
Types of Sights				
& their uses				
Dominate Eye Exercise				Left/Right (Circle One)
Transporting Firearms				
Safe Gun Handling				
Practical Exercise				
Rifle Knowledge			Certified 4-H Sh	nooting Sports Instructor Signature:
Verification				

Shooting Fundamental Requirements	Completion Date	Shooter's Initials	Instructor's Initials	Comments
Range Safety Rules (Eye & ear protection)				
Basic Range Commands (Used to control range)				
Sight Alignment & Trigger Control				
Sight Picture & Breath Control				
Sight Adjustment				
Positions:				
Bench Rest				
Standing				
Sitting				
Kneeling				
Prone				
Self Control				
Shooting Fundamental			Certified 4-H S	hooting Sports Instructor Signature:
Verification				

This form must be completed and signed by a Michigan 4-H Shooting Sports "Certified Rifle Instructor". The instructor must be registered with the Ingham County 4-H Office. Completed forms must be presented to fair registrar each year.

By signing this form the instructor is verifying that the above named shooter has successfully completed the "4-H Basic Rifle Course" as outlined in the National 4-H Shooting Sports Curriculum and the training provided has been in compliance with the Michigan 4-H Shooting Sports Program "Safety Practices and Policies" document.