

## ARCHERY PERMISSION FORM

This year, we are fortunate to have a certified archery instructor to provide safety lessons, demonstrations, and practice opportunities with recurve bows. Practice opportunities will only be allowed to Regular Members, 9 years and older. **Primary Members may only observe practice shooting.** If you have any questions about this educational opportunity, please contact Megan Osbourn at the 4-H Office at 822-7515.

Please complete the following to give permission for your child to participate in the shooting sports practice opportunity. No member will be allowed to participate without a signed permission slip.



I, \_\_\_\_\_, give my permission for my child, \_\_\_\_\_ (who is 9 years or older) to participate in the shooting sports learning opportunity at the 4-H Summer Camp held June 10 – 14, 2012. I understand that all equipment will be provided and that **NO PERSONAL ARCHERY OR SHOOTING EQUIPMENT IS ALLOWED IN CAMP.**

\_\_\_\_\_  
Print Name of Parent/Guardian

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date