

**New York State 4-H Shooting Sports
Instructor Training / Match Host – Application**

Year of Proposal:

Proposed Dates of Event:

Hosting County (ies):

Educator Contact- Name:
 CCE Address:
 Telephone:
 Email:

Volunteer Contact- Name:
 CCE Address:
 Telephone:
 Email:

Will you need NYS instructors? Is so, please indicate which disciplines below and if you are working with local instructors who are apprenticing, list the name, telephone, and email of that instructor. The local instructor must have been to National training within the last five years in that discipline to be considered.

Discipline	NYS Instructor	Local Instructor	Telephone	Email
AirPistol				
Archery				
Hunting				
Muzzleloader				
Rifle				
Shotgun				
Living History				

What are the names and addresses of the locations you hope to host these events?

Do you have written approval from the county extension director/board? Yes or No

Do you have a reciprocal certificate of insurance with these locations? Yes or No

Did you fill out a Range inspection checklist?

Are you providing meals and housing for attendees? Yes or No

Are you providing meals and housing for all instructors as local cost? Yes or No

Who will be the staff responsible for the application database /registration?

(FYI- all registration for instructor training must include a section for CCE educators to sign to indicate the applicants have undergone: 1) a criminal background check; 2) a reference check; 3) an interview; and 4) a County orientation.

Did you need place a deposit to secure the location? Yes or No

Does the NYS 4-H Shooting Sports program need to reimburse the cost of deposit if the training is cancelled?

The New York State 4-H Shooting Sports program needs to provide which of the following:

- | | | | | | | | |
|--------------------------|--------------|--------------------------|----------------------|--------------------------|-----------------|--------------------------|--------------|
| <input type="checkbox"/> | Air Rifles | <input type="checkbox"/> | Pellets/CO2 | <input type="checkbox"/> | Pellet Traps | <input type="checkbox"/> | PPEs |
| <input type="checkbox"/> | Air Pistols | <input type="checkbox"/> | Pellets/CO2 | <input type="checkbox"/> | Pellet Traps | <input type="checkbox"/> | PPEs |
| <input type="checkbox"/> | Bows | <input type="checkbox"/> | Arrows | <input type="checkbox"/> | Backstops | <input type="checkbox"/> | Tabs/guards |
| <input type="checkbox"/> | Hunting Kit | <input type="checkbox"/> | Skins, skulls | <input type="checkbox"/> | Misc Hunting | | |
| <input type="checkbox"/> | Muzzleloader | <input type="checkbox"/> | Powder/ball | <input type="checkbox"/> | Targets | <input type="checkbox"/> | PPEs |
| <input type="checkbox"/> | Shotguns | <input type="checkbox"/> | Trap Machines | <input type="checkbox"/> | Clays/Shells | <input type="checkbox"/> | PPEs |
| <input type="checkbox"/> | LH Persona | <input type="checkbox"/> | LH Cooking Kit1 | <input type="checkbox"/> | LH Cooking Kit2 | <input type="checkbox"/> | Crafting Kit |
| <input type="checkbox"/> | Curriculumms | <input type="checkbox"/> | Rockers/ NYS Patches | | | | |

Signature of Applicant

Date

Approval of 4-H County Extension Educator

Date

Approval of 4-H County Extension Director /Supervisor

Date

Approval of NYS 4-H Shooting Sports Director

Date