CA 4-H Shooting Sports Program Traning Request and Registration Form 7/2019

University of California
Agriculture and Natural Resources

Making a Difference for California

Submit prior to training course **PERSONAL INFORMATION**

Name:								
Address:								
County:								
Home Phone:	Work Phone:							
Fax Number:	E-Mail:							
4-H Club/Unit:	Position:							
DISCIPLINE Please rank in order: first, second, and third the discipline area you would like to receive training in:								
Archery	/	Hunting						
Rifle Re-loading								
Pistol								
Shotgu	Shotgun							
	in only one discipline	during the training	y)					
TRAINING Please list your previous shooting sports training received and any certificates you have received.								
Discipline	Training Receive		Cortinoat	Certification Level				
2 looipiir lo	Training reconvo	<u> </u>		Continuation Love.				
Shooting Background								
Do you have hunting experience?		Yes	No	Number of Years				
Honors/Recognition:								
Do you have competitive experience?		Yes	No	Number of Years				
Honors/Recognition	า: _							

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COMMUNITY ACTIVITIES

Please list your participation in community activities and organizations with offices or leadership positions held where applicable.

Organiza	Organization or Activity Offices/Leadership Positions Held Honors/Recognition							
TRAINING LOCATION								
Please rank in order: first, second, and third the section you would like to receive your								
training in, as well as how far you would be willing to travel.								
Section:	NI d	N 4 0 4 1	0 (1 0 (1	0 41				
	North	North Central	South Central	South				
Mileage:								
iiiioago:	25 Miles	50 Miles	75 Miles	100Miles				
		REFERENC	FS					
List two references that will endorse your qualifications:								
Name Address			Phone					
SIGNATURES								
		SIGNATUR						
Applicant Signature:			Date:					
4-H Staff	I verify that this a	applicant has completed the		ation and screening				
FII Olaii.	process.	ippiloditi rido completed tile	addit voluntoor onente	and soroching				
Print Nam	e:							
Signature:			Date:					
	-							

Return this completed "Training Request and Registration Form" to the instructor or registrar of the course you will be taking. The contact information is in the course announcement.

It is the policy of the University of California (UC) and the UC Division of Agriculture & Natural Resources not to engage in discrimination against or harassment of any person in any of its programs or activities (Complete nondiscrimination policy statement can be found at http://ucanr.edu/sites/anrstaff/files/176836.doc). Inquiries regarding ANR's nondiscrimination policies may be directed to UCANR, Affirmative Action Compliance & Title IX Officer, University of California, Agriculture and Natural Resources, 2801 Second Street, Davis, CA 95618, (530) 750-1397.