



2025 MCCRACKEN COUNTY 4-H HOT SHOTS

PRACTICES WILL BEGIN THE WEEK OF APRIL 14

Pistol	Tuesday	5 PM
Rifle	Thursday	5 PM
Archery	Thursday	5 PM
Trap	Thursday	5 PM

MCCRACKEN COUNTY 4-H BENEFIT MATCHES

Saturday, June 28

Saturday, August 23

All disciplines plus buddy matches.

Food Truck will be on-site.

MCCRACKEN COUNTY SHOOT WITH A COP

Saturday, June 7

All disciplines but no buddy matches. Ages 9 and up can shoot. \$5 per individual (LEOs will have the fee waved)

STATE SHOOTING COMPETITION

Saturday, September 13- Rifle, Pistol, and Archery

Sunday, September 14 - Trap

If your youth wants to attend, please contact 4-H Rachael Davis for more information.

4-H HOT SHOTS SHOOTING SPORTS CLUB

Shooting Sports -It is our mission to provide a safety-oriented, educational shooting for the youth of McCracken County through the use of firearms as tools for teaching safe firearm handling, responsibility, respect, self-discipline, and recreational opportunities. Through this program, we will be able to help youth develop life skills, increase their knowledge, and acquire a wholesome attitude toward themselves and others. Other goals of this program are:

- To promote the highest standards of safety, sportsmanship, and ethical behavior.
- To encourage participation in natural resources and related natural science programs by exposing participants to the content through shooting, hunting, and related activities.
- To enhance the development of self-concept, character, and personal growth through safe, educational, and socially acceptable involvement in shooting activities.
- To expose participants to the broad array of vocational and life-long avocational activities related to shooting sports.
- To strengthen families through participation in life-long recreational activities.
- To complement and enhance the impact of existing safety, shooting, and hunter education programs using experiential educational methods and progressive development of skills and abilities.

FREQUENTLY ASKED Q&A

- **What is the McCracken County Hot Shots 4-H Club?** The McCracken County Hot Shots 4-H Club is a shooting sports education program that is sponsored by the McCracken County Extension Office using the University of Kentucky Cooperative Extension Service 4-H Shooting Sports Education Program. The program believes that:
 - Youth development is the number one goal of the Shooting Sports Education Program
 - It provides an effective tool for human growth and development for youth and adults.
 - It is an introduction to the safe and responsible use of firearms and archery equipment, a valuable life skill. The program trains youth to handle and shoot firearms safely. It teaches leadership and responsibility in a nonformal environment while offering fun activities for youth and adults. While competition is not the main focus, the program does offer opportunities to participate in shooting events, competing in various disciplines and age groups.
- **What disciplines are offered?** Currently, we offer four disciplines:
 - Trap (Shotgun)
 - Rifle (.22, Air, BB)
 - Pistol (Air and .22 caliber)
 - Archery (Compound and Recurve)
- **Is the youth allowed to participate in more than one discipline?** First-year members can choose up to two disciplines and returning members can choose as many as they can attend practices.
- **Where are practices held?** Practices are held throughout the week at the range at Paducah Shooters Supply on Cairo Road.
- **What is the “season” that the youth participate in?** We plan on starting practice at the beginning of April. 4-H matches are held during the summer and the state match which is held towards the end of September. We ask that each youth participate fully from April to September.
- **Who is allowed to join?** Any youth that lives in McCracken County (or that attends a school in McCracken County). Youth must be between the ages of 9-19 to be able to participate.
- **What if I live outside of McCracken County?** If you reside outside of McCracken County, you must meet one of the following requirements:
 - Must attend school in McCracken County
 - If the county you live in does not offer the discipline you are interested in, youth are able eligible to join the program. Please contact 4-H Rachael Davis for details.
 - Although, priority will be given to McCracken County residents if a discipline has a limited number of spots.
- **How much does it cost to join?** The dues for 2025 are \$65.00. Checks and exact cash are accepted. Make checks out to McCracken County 4-H Council.
- **Will there be any other costs?** We have been very lucky to have great sponsors such as the National Rifle Association and local sponsors to help pay for needed supplies.

- **What do the fees go towards?** The 4-H dues go to help pay for needed expenses such as equipment, range fees, and registration fees for the state shoot competition.
- **Are there volunteers that help teach the youth?** Yes! Each discipline has certified volunteers who were required to pass Youth Protection Standards set by the University of Kentucky, pass a background check, and agree to civil rights standards that do not discriminate against race, color, age, sex, religion, national origin, and disability along with completing Kentucky 4-H Shooting Sports Education Program training in their disciplines.
- **As a parent, am I allowed to help?** Yes! The 4-H programs would not be where they are without volunteers! There are many areas in which you may contribute your time. We always need volunteers to help promote events, fundraising for the group, and event planning for the matches. We need the youth's parents to help at the local matches with registration, scoring targets, and other duties. Also, if your child attends the State Shooting Sports Competition, you will be responsible for volunteering to help for a minimum of two hours.
- **Am I allowed to directly help the youth on the range?** Please contact 4-H Agent Rachael Davis and the discipline coach for more details. A volunteer application is required, allowing passing a background check, and youth protection standards set by the University of Kentucky.
- **How do I become a coach?** We are always looking for additional coaches in each discipline, as well as expansion of future programs. Please contact the extension office for more details. Certifications are in the spring and fall.
- **How will I know if practices are canceled due to the weather?** We use the band app to send out notices about canceled practices and other news about the team. See the band app section of the packet on how to install it.
- **Can my youth and/or an adult get their hunter's education while in this club?** Yes, please let 4-H Agent Rachael Davis for details on getting this completed.
- **Is there a dress code on the range?** Yes, due to safety there is a dress code that even states the kind of shoes are allowed on range was set by the State of Kentucky 4-H Shooting Sports.
Specific guidelines include: a. Shorts should be a modest length. A good length is about mid-thigh. No cut-off shorts permitted. b. All shirts must have sleeves. Spaghetti straps, muscle shirts, bare midriffs, low necklines, or otherwise revealing clothing will not be allowed. c. No clothing with alcohol, tobacco, vulgar language, or sexual reference will be permitted. If a violation is found, the individual will have the opportunity to correct the issue before further action is taken.
Footwear Policy – Participants are required to wear shoes that completely cover the foot, including soles, during all events. Examples of footwear that are NOT acceptable include sandals, clogs, Croc™ style shoes, slippers, house shoes, flip-flops and bare feet.



We will use Band App to send out notices about practices and other news related to the team. It is also used for other 4-H programs within McCracken County.

To install:

- **Locate the Band App on your App Store on your cell phone.**
- **Scan the QR code to join.**



Free, Easy, and saves time.

Band is designed to simplify life for everyone involved. The team(group) has a central place for all communication, and this eliminates the need for phone calls, emails, and handouts. By the way... it's FREE.

2025 MCCrackEN COUNTY 4-H HOT SHOTS SHOOTING SPORTS CLUB



Name: _____

MEMBER REGISTRATION

Dues: \$65.00

Debit/Credit Cards accepted in office (no phone transactions)

Please make checks payable to:

McCracken County 4-H Council

Please put your child's name on the memo

**Paper or digital copies of registrations are due to the McCracken County
Cooperative Extension Service by Monday, April 7th**

*(There is a locked drop-off box on the right side of the main front door
if you cannot get to the office during office hours)*

Trap participants will have to bring their own shells or purchase shells at the range.

NO RELOADS ALLOWED

Staff Use Only

Dues Paid _____

2025 4-H HOT SHOTS ENROLLMENT

Date: _____

New: _____

Returning: _____

First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____

Zip: _____ Phone: _____ - _____ - _____

Email: _____

Age: _____ (*Child MUST BE 9 As of January 1, 2025 NO EXCEPTIONS*)

T-Shirt Size: (*Choose one*)

Youth

____ S ____ M

____ L ____ XL

Adult

____ S ____ M

____ L ____ XL

____ XXL

Rank **up to** four disciplines:

- Rank disciplines 1 (first choice) up to 4 (last choice)
- ***Only rank disciplines you are interested in.***

____ Rifle

____ Pistol

____ Shotgun

____ Archery

****** Please note that for Rifles and Pistols, there is a limit of 20 participants for each with priority given to returning members. ******

PERMISSION TO PARTICIPATE

MCCRACKEN COUNTY HOT SHOTS 4-H SHOOTING SPORTS CLUB

I give permission to my child, _____ to participate as a member of the Hot Shots 4-H Shooting Sports Program from 1/1/25 to 12/31/25.

I am also aware that as a parent/guardian, I will be responsible for volunteering for at least 2 local matches. If my child participates in the Kentucky State Shoot in September, I will be responsible for volunteering for a minimum of 2 hours.

I understand my Child will be handling a firearm including, but not limited to pistols, rifles, shotguns, and bows. The shooting sports program, as part of the overall 4-H program, is designed to teach Shooting safety, build relationships with peers, learn to cooperate, develop leadership skills such as poise, confidence, and teach others. They also learn to work with adults, appreciate the abilities of others, and develop a sense of pride in their community. Involvement in the Shooting Sports program will lead to contact with other individuals, both adults and youth who have different levels of experience handling firearms and different sets of personal values. I understand that participating in the 4-H Shooting Sports program is voluntary and is not required to be a 4-H member.

I am aware of and have discussed with my child that:

- a. Shooting may result in a personal injury or could cause injury to another person if safety rules are not followed.
- b. Other participants may act in a negligent manner which otherwise may result in harm to my child.
- c. While being transported by van to offsite competitions or events, my child may be involved in a collision with another automobile, person, animal, or object which may result in harm to my child.
- d. Shooting may result in injury or accidental death from hazards arising from firearms equipment.
- e. Certain risks associated with outdoor activities could occur, including but not limited to, contact with poisonous plants, stinging insects, wild animals, or reptiles.

I recognize that the above-outlined activities and potential resulting risks may cause harm, accident, loss, injury, or death to participants or other persons in the immediate vicinity. I have discussed with my child the importance of following directions and prescribed safety procedures, which will be outlined by the 4-H professionals and/or trained volunteers prior to and during the activities. I have also advised my child to follow all posted directions and instructions at the firing range and during any activity there. I understand that my child is not required to participate in this activity but grant permission for him/her to do so despite the possible risks. I recognize that by participating in this activity, as with any physical activity, my child may risk potential injury. I hereby attest and verify That I Have been advised of the Potential risks, that I Have full knowledge of the risks involved in this activity, and that I assume any expenses that may be incurred in the event of a loss, an accident, illness, or other incapacity, regardless of whether I have authorized such expenses.

Parent/Guardian's Signature

Date

4-H Member's Signature

Date

Kentucky 4-H Shooting Sports

Essential Standards for Youth Participants

It is the policy of the University of Kentucky, Kentucky 4-H and the Kentucky 4-H Shooting Sports program to encourage and accept participants without regard to race, color, ethnic origin, national origin, creed, religion, political belief, sex, sexual orientation, gender identity, gender expression, pregnancy, marital status, genetic information, age, veteran status, or physical or mental ability. While the 4-H Shooting Sports program is open to all individuals who meet the required age qualifications, their use of firearms and archery equipment is subject to the joint approval of their county 4-H Agents, Certified Level I Instructor(s) and Certified Level I Coordinator. This approval is based on the youth's ability to follow instructions, adhere to all safety rules, and exhibit the standards detailed below. If a youth is not following these Essential Standards, the 4-H Code of Conduct or the safety guidelines provided to them their approval to use firearms/archery equipment can be revoked at any time by a county 4-H Agent, Certified Level I Instructor(s) or Certified Level I Coordinator.

Parents/Guardians of participants who have medical conditions or other disabilities requiring special attention should alert the agent to ensure proper accommodations are provided. If the participant requires one on one assistance or a level of attention not available through county Certified Level I Instructors, the parent/guardian may be asked to provide an adult chaperone that will go through the Client Protection Process to assist the participant during live fire activities.

To determine whether a youth can participate in the Shooting Sports program, the following factors will be considered:

- Ability to understand and follow oral or written instruction.
- Ability to understand and respond to potentially dangerous and/or high stress situations.
- Ability to safely handle and fire the firearm/archery equipment being used.
- Ability to participate in group activities with minimal individual attention.
- Ability to foster an attitude that promotes the principles of 4-H youth development.
- Ability to represent the organization in a positive manner at all times.
- Ability to maintain proper behavior, as outlined by county 4-H Agent, Level I Coordinators and Level I Instructors in order to have a safe environment for oneself, others in the club, spectators, and the public.

As a member of the _____ County 4-H Shooting Sports Club, I have read and understand the above standards I will be held to as a participant. I have also read and understand the Kentucky 4-H Code of Conduct. I agree to abide by all rules and regulations regarding the Kentucky 4-H Shooting Sports Program or I forfeit the right to participate in the program.

Signature of Youth Participant

Date

I certify that my child and I have read and understand the above standards and the Kentucky 4-H Code of Conduct. I understand that for my child to participate in 4-H Shooting Sports they must uphold these standards at all times.

Signature of Parent/Guardian

Date



4-H Participant Information/Enrollment Form

Should this information change during the program year, it is the responsibility of the parent/guardian(s) to notify the Extension Personnel in writing.

I. Re-Enrollment

If re-enrolling, please complete section I. Re-Enrollment, then review sections II through IX and verify review by signing and dating.

Name:		School Name:		County:	
Grade:					

II. Family Information

This is the primary information we will use to communicate with your 4-H member.

Family Name:		Family Email:	
Family Phone:		Family Address:	

III. Member Information

First Name:		Last Name:			
Preferred Name (optional):		Birthdate:		# of Previous Years in 4-H:	
Sex:	M F	Residence:	Farm	Town <10,000 or Rural Non-Farm	Town/City/Suburb 10,000-50,000
			City/Suburb >50,000	City-Central >50,000	
Hispanic/Latino:	Yes No	Race:	American Indian	Asian	Black
			White	Prefer not to say	Native Hawaiian or Pacific Islander
				Not Listed:	

IV. Parent/Guardian 1 Information

Last Name:		First Name:	
Phone:		May we release personal information to this person?	Yes No

V. Parent/Guardian 2 Information

Last Name:		First Name:	
Phone:		May we release personal information to this person?	Yes No

VI. Other Emergency Contact

Name:		Relationship:	
Phone:		May we release personal information to this person?	Yes No

VII. Pick Up Information

In addition to the parent/guardian(s) and emergency contacts listed, please list the names of up to two additional people authorized to pick up the above referenced child. These individuals will not be contacted in case of an emergency, the parent/guardian(s) or emergency contact information will only be used. If an individual who is not listed on this form is permitted to pick up your child/children, the parent/guardian(s) will need to provide written permission (letter or email) to Extension personnel or approved volunteer responsible for the event/activity.

Name of First Person:		Relationship to 4-H Member:	
Phone:			
Name of Second Person:		Relationship to 4-H Member:	
Phone:			

VIII. Military Service (if none, skip this section)

Relationship to Member serving:		Branch of service	
Service Status:	Active Duty	National Guard	Reserves Other:



IX. Health History

Does the participant have, or at any time has had, any of the following? Check “Yes” or “No” to each item. Please explain any “Yes” answers (noting the number of the item) in the space below or on an additional sheet if necessary. Reporting conditions allow Extension personnel and approved volunteers to best support your young person and will be kept confidential.

Allergies

1.Serious Allergy to Insects	Yes	No
2.Serious Allergy to Dairy	Yes	No
3.Serious Allergy to Gluten	Yes	No
4.Serious Allergy to Nuts	Yes	No
5.Other Allergy(Please explain)	Yes	No

Please explain any “yes” responses, including medications for any allergies:

The following over the counter medications may be administered to my child without contacting me:

Acetaminophen:	Yes	No	Antacid:	Yes	No	Antihistamine Pill:	Yes	No
Decongestant:	Yes	No	Dramamine:	Yes	No	Hydrocortisone Cream:	Yes	No
Ibuprofen (Advil)	Yes	No	Polysporin (topical antibiotic)	Yes	No			

Conditions

1.Asthma	Yes	No	6.Fainting	Yes	No	11.Wear Glasses/Contacts?	Yes	No
2.Bronchitis	Yes	No	7.Headaches	Yes	No	Please explain any “yes” responses, including medications taken for any conditions:		
3.Convulsions	Yes	No	8.Heart Condition	Yes	No			
4.Diabetes	Yes	No	9.Hypoglycemia	Yes	No			
5.Ear Infection	Yes	No	10.Other Conditions	Yes	No			

Please explain any restrictions (dietary, physical, etc)

Social, emotional, and/or behavioral health information:

X. REVIEW CONFIRMATION SIGNATURE

All information provided on this form is correct and complete to the best of my knowledge. This person has permission to engage in all events and activities. I hereby give permission to the event designee to provide routine health care, administer prescription and over the counter medications as noted and seek emergency medical treatment if warranted. I agree to the release of all records necessary for medical treatment, billing, or insurance. In the event I cannot be reached in an emergency, I give permission to the attending physician to secure and administer treatment, including hospitalization.

PARENT/GUARDIAN: _____ DATE: _____

XI. SURVEY & EVALUATION RELEASE

I hereby establish my willingness to participate as an adult (i.e., 4-H leader, other volunteer, parent/ guardian, site manager, etc.) and give permission for my child (under 18 years of age) to complete surveys and evaluations that will be used to determine program effectiveness or to promote the program. I understand that participation in surveys and evaluations is voluntary and that my child and I may choose not to participate and may withdraw from surveys and evaluations without impact on my or my child’s eligibility to participate in the 4-H program. I understand that my child or I may be asked for consent before completing a survey or an evaluation.

Yes No I am willing to participate or give permission for my child to participate in any program evaluation. (Initials)

XII. PERMISSION TO PARTICIPATE

I acknowledge that my child is participating in 4-H programs for their own personal benefit and that my child will participate in recreational and other activities as part of 4-H programs. I understand that some activities may have inherent dangers and physical risks and that no amount of care, caution, instruction, or expertise can completely eliminate them. I assume responsibility for all risks, known and unknown, involving my child’s participation in 4-H programs and I voluntarily authorize my child’s participation in reliance upon my own judgment and knowledge of my child’s experience and capabilities. I hereby agree to indemnify and hold harmless the University of Kentucky Cooperative Extension Service and all related parties from any liability, losses, costs, damages, claims or causes of action of any kind or nature arising from or related in any way to my child’s participation in 4-H program. (Initials)

XII. PUBLICITY RELEASE

I hereby grant the 4-H program, University of Kentucky and their agents, the right to use, reproduce, assign, and/or distribute still pictures, video, and sound recordings of myself or my minor child without compensation for use in promotion, advertising, educational publications or online content

PARENT/GUARDIAN _____ NO, I DO NOT PERMIT

4-H Youth Development Code of Conduct Form

All 4-H members and family/friends/caretakers associated with 4-H members must respect the individual rights, safety and property of others and adhere to this Code of Conduct. A 4-H member may be prohibited from participating in a specific event/program if the participation by the individual poses a danger to the 4-H member and/or others. Safety of all involved in 4-H programs is top priority, the following guidelines are designed to ensure all involved understand their role in participating in a safe and educational environment for all.

WHILE ENROLLED AS A 4-H MEMBER:

- To be a member in good standing it is expected that the 4-H participant attends planned sessions, workshops, field trips, and meetings associated with their enrollment. To be eligible for cumulative events in 4-H, members must complete at least six hours of education in the core program area they are participating in under the expectations laid out by the 4-H program.
- Dress codes will be specific to individual events/programs/activities.
- The possession and use of alcoholic beverages, tobacco products, vape juice and/or devices, and/or drugs (except for medications prescribed to the participant by a licensed physician, with proper paperwork and accommodations made) are prohibited.
- Possession of firearms not for educational use is prohibited.
- Setting of fire alarms and tampering with fire extinguishing and other emergency equipment are prohibited.
- Gambling of any type is prohibited.
- Respect toward others and facilities shall be demonstrated. Bullying, harassment of others or destruction of property shall not be tolerated. Bullying and harassment can include the use of social media.
- Physical violence is not tolerated.
- Obscene, discriminatory and/or inappropriate language, roughhousing, and insubordination are prohibited at all times.
- Display of overly affectionate or inappropriate attention between participants is prohibited.
- Technological equipment (including but not limited to cell phones, laptops, or mp3 players) shall not interfere with the program and may not be allowed in certain situations.
- Articles of clothing which display profanity, products, or slogans which promote tobacco, alcohol, drugs, sex, or are in any other way distracting, are prohibited.
- Additional expectations may be required based on the activity/program/event the 4-H member is participating in.

WHILE ATTENDING OVERNIGHT 4-H EXPERIENCES THE FOLLOWING WILL ALSO APPLY:

- All participants must follow the agenda and expectations that are set forth by the program planners. Chaperones/adult volunteers will actively monitor all participants.
- All participants are to be in their assigned area at curfew and comply with quiet hours, lights out, and other rules of the event. Chaperones/adult volunteers will actively monitor all participants.
- No member or volunteer may leave the event/activity/program without the permission of the event planner or adult in charge. An adult shall accompany a 4-H member at any time they leave the grounds. Adults shall notify another adult before leaving the grounds.
- At overnight events, only conference participants may be in sleeping areas. Individuals may only be in their assigned sleeping area. Lounges or common areas may be used only for working committees and social activities.

Any violations of this Code of Conduct shall be reported promptly to the chaperone for the individual and to the person in charge of the event. The person in charge of the event shall have the final responsibility for disciplinary action. Failure to comply with the Code of Conduct by 4-Hers and family/friends/caretakers associated with the 4-H participant may result in penalty including, but not limited to, the following:

- Sent home from the activity or event at their own expense.
- Barred from participation from future 4-H events.
- Assessed the cost of damages for destruction of property.

I, _____, have read the Code of Conduct and agree to abide by its rules.
(Print Name)

I understand that infraction of this Code of Conduct will result in any or all of the penalties listed above.

Member: _____ County: _____

Parent/Guardian: _____ Date: _____

