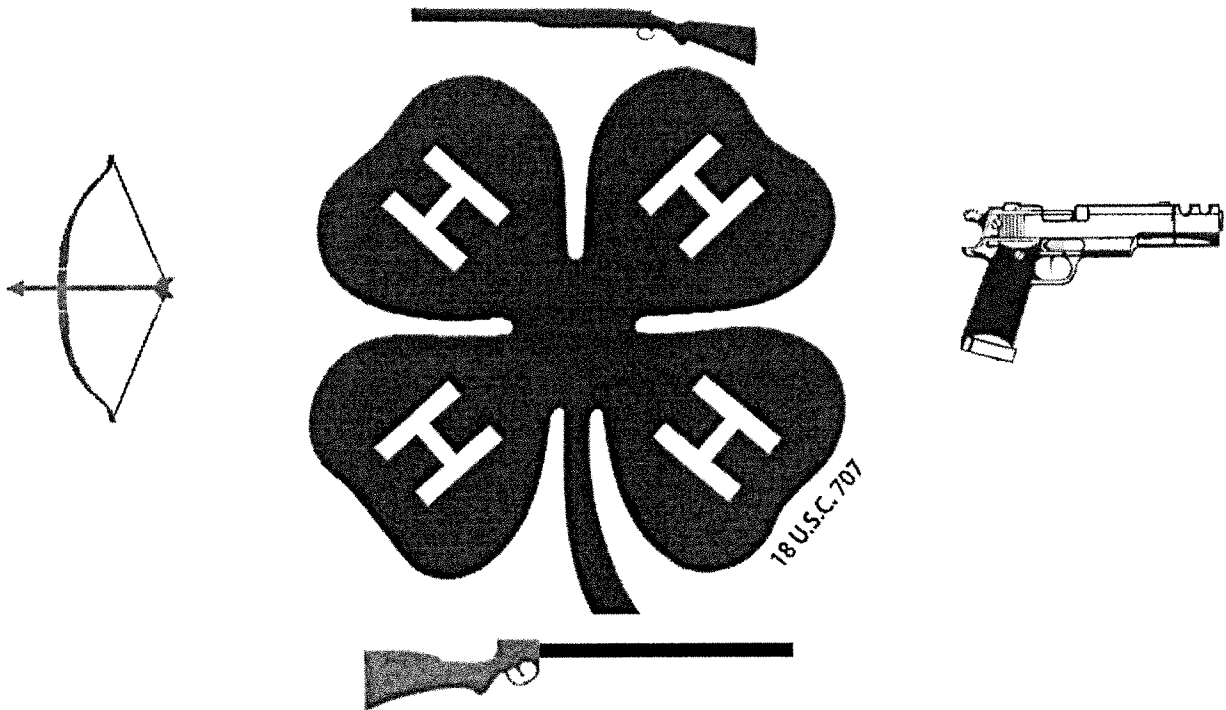


# DEARBORN COUNTY 4-H

# SAFE

## Sporting Arms Family Education

11706 County Farm Road  
Aurora, IN 47001



City Hall • 229 Main Street • Aurora, IN 47001-1385 (812) 926-1189  
Purdue University, Indiana Counties and U.S. Department of Agriculture Cooperating  
An Affirmative Action/Equal Opportunity Institution

## SAFE

Sporting Arms Family Education is a project directed by the county shooting sports leaders that have received state 4-H approved training. This group conducts all shooting activities with the approval of the 4-H Board of Directors. The group is led by the Coordinator who oversees the activities of each discipline. The six disciplines offered in Dearborn County are as follows:

Archery	Rifle
Muzzleloader	Shotgun
Pistol	Outdoor Skills

The following instructors have been trained as "Certified Instructors" through the Purdue 4-H Shooting Sports Workshop program. A Certified 4-H Instructor must have passed the course to be supported by the Purdue Liability Insurance program. All 4-H shooting activities must have a certified 4-H Instructor in the respective discipline present and in control of the activity.

**Shooting Sports Coordinator:** Greg Green (Coordinator) [gegreen521@gmail.com](mailto:gegreen521@gmail.com) 812-655-1354

Kasie Newman [kasienewman0507@yahoo.com](mailto:kasienewman0507@yahoo.com) 812-907-0984

### Instructors:

**Archery:** Criss Green ([ndbmangr@one.net](mailto:ndbmangr@one.net)) 513-403-2774  
Adam Tippin ([ckros6@gmail.com](mailto:ckros6@gmail.com)) 865-789-9555

Earl Shuter ([eshuter0517@gmail.com](mailto:eshuter0517@gmail.com)) 812-584-8411

### Muzzleloader:

**Shotgun:** Robin Newman ([robin\\_newman84@yahoo.com](mailto:robin_newman84@yahoo.com)) 812-907-0985  
Mike Slayback ([whiteyl21.ms@gmail.com](mailto:whiteyl21.ms@gmail.com)) 513-444-7950

**Rifle:** Greg Green ([gegreen521@gmail.com](mailto:gegreen521@gmail.com)) 812-655-1354  
Mike Slayback ([whiteyl21.ms@gmail.com](mailto:whiteyl21.ms@gmail.com)) 513-444-7950

**Pistol:** Cari Green ([cariannngreen@yahoo.com](mailto:cariannngreen@yahoo.com)) 513-266-9361  
Carri Green ([cariann.green@yahoo.com](mailto:cariann.green@yahoo.com)) 513-266-9361

**Outdoor Skills:** Greg Green ([gegreen521@gmail.com](mailto:gegreen521@gmail.com)) 812-655-1354

For club and general information contact Kasie Newman at 812-907-0984 or [kasienewman0507@yahoo.com](mailto:kasienewman0507@yahoo.com).

Each of these instructors received advanced training at the State Shooting Sports Workshop. They help with the project under the guidance of the shooting sports instructors.

SAFE is a project, sport, hobby, and it's fun. The shooting sports project is designed to teach the safe use of fire arms on the shooting range and in the hunting field. The project instills the importance of home firearms responsibility and develops skills to properly handle various types of firearms and archery equipment.

#### **The Objectives of the Project:**

1. Learn the Ten Commandments of Firearms Safety.
2. Learn to handle a firearm properly.
3. Learn the Indiana laws concerning firearms as related to hunting.
4. Learn the rules of Safety on the Firearms and Archery range.
5. Learn to identify various kinds of arms, ammunition and archery equipment.
6. Learn to aim and fire firearms and archery equipment on the range.
7. Learn to handle archery equipment properly and learn nomenclature.
8. Learn good hunter ethics.
9. Learn history of firearms, archery equipment and hunting in our country and area.
10. Learn related activities and skills to enhance the full scope of opportunities associated with shooting sports.

#### **GENERAL RULES**

1. Do not attend range events if anyone in the family is currently experiencing COVID symptoms or is under quarantine due to positive COVID exposure.
2. Activities Release form from parents or guardian and a health form must be on file in the extension office to participate in the shooting sports program.
3. All parents are encouraged to attend the training meetings with their child. Parents are also encouraged to take all safety courses and to actively participate in the program as an adult volunteer leader.
4. The commands or instructions of the instructor, volunteer leader, or range officer must be followed immediately and completely.
5. Horse play will not be tolerated. The instructor or range officer has the right to ask any member or parent to leave or to remove him/herself from the firing line.
6. It is highly recommended that members complete the DNR hunter education course. This course is offered each year by the county shooting sports program. Other groups also offer the course throughout the year. It does not matter where you take the course.

#### **TEN COMMANDMENTS OF SHOOTING SAFETY**

1. Control the direction of your firearm's muzzle. Carry your firearm safely, keeping the safety on until ready to shoot. Keep your finger off the trigger until ready to shoot.
2. Identify your target and what is beyond it. Know the identifying features of the game you hunt.
3. Treat every fire arm with the same respect due a loaded firearm.
4. Be sure the barrel and action are clear of obstructions and that you have only ammunition of the proper size for the firearm you are carrying.
5. Unload firearms when not in use. Leave the actions open. Firearms should be carried empty in cases to and from shooting areas.
6. Never point a firearm at anything you do not want to shoot. Avoid horseplay with a firearm.
7. Never climb a fence or tree, or jump a ditch or log, with a loaded firearm. Never pull a firearm toward you by the muzzle.
8. Never shoot a bullet at a flat, hard surface or water. During target practice, be sure your backstop is adequate.
9. Store firearms and ammunition separately beyond the reach of children and careless adults.
10. Avoid alcoholic beverages or other mood-altering drugs before or while shooting.

## **"THREE RULES OF SAFE GUN HANDLING"**

### **FIRST**

Always keep the gun pointed in a safe direction.

### **SECOND**

Always keep your finger off the trigger until ready to shoot.

### **THIRD**

Always keep the gun unloaded until ready to use.

## **"Rules of Safe Archery Handling"**

### **FIRST**

Always keep arrows pointed in a safe direction.

### **SECOND**

Do not draw back until bow is pointed in a safe direction.

### **THIRD**

Never touch an arrow until ready to shoot.

### **FOURTH**

Follow all Range Commands.

## **GENERAL DISCIPLINE REQUIREMENTS:**

1. **4-H'er must attend range safety review meeting at every practice prior to being allowed to shoot at the range.**
2. Shooting Sports Coordinator, Leader or Range Captain has the authority to dismiss any member/parent from the activity for the day for any safety violation.
3. **Each discipline is treated as a separate project; 4-H'ers enrolling in one or more disciplines shall complete fair exhibits and record sheets for each discipline.**  
  
Example: 4-H'er enrolled in rifle & archery you would need to make two fair exhibits.
4. **Competition is for Fun. You must complete all enrolled exhibit hall discipline projects in order to be eligible for competition awards.**
5. Each discipline shall meet independently and shall be guided by an adult Discipline Leader "certified" through the State 4-H Shooting Sports Workshop; only a 4-H "certified" leader may conduct any activity involving the use of archery equipment or firearms. NO EXCEPTIONS DUE TO INSURANCE LIABILITY RESTRICTIONS required by the Purdue 4-H Liability Insurance Policy for volunteers working with shooting activities.
6. Discipline training shall begin weather permitting and continue through the fair. Most activities will occur as weather permits for shooting activities. Many disciplines offer activities throughout the calendar year.
7. Awards will be awarded at the end of competition for winners in each discipline.
8. Parents are encouraged to become actively involved with this project through participation, encouragement and suggestions. The program always needs more Discipline Leaders, volunteers and range helpers.

Each member must attend range safety training. The member may choose any of the six disciplines, Archery, Muzzleloader, Rifle, Pistol, Shotgun or Outdoor Skills. The member must complete an exhibit requirement in each project discipline. At the end of the instruction and range practice year, a competition will be held. To be eligible to participate in the competition shoot a member should attend three shooting practices.

Members that are in the 3rd grade and above during the current calendar year may sign up for Outdoor Skills as a discipline.

#### **EXHIBIT GUIDELINES**

Create an exhibit that shows the public what you learned in shooting sports education this year. Exhibits must be displayed horizontally, sized 22" x 28", mounted on a firm backing (foam-core board or other), and covered in clear plastic or other transparent material. Be sure to include a label with your name, grade, and county. Title your exhibit with one of the following: archery, outdoor skills, muzzle loading, pistol, rifle, shotgun, or shooting sports. You can use a subtitle, if you wish.

All posters, notebooks, and display boards must include a reference list indicating where information was obtained, giving credit to the original author, to complete the 4-H member's exhibit. This reference list should/might include web site links, people and professionals interviewed, books, magazines, etc. It is recommended this reference list be attached to the back of a poster or display board, be the last page of a notebook, or included as part of the display visible to the public. A judge is not to discredit an exhibit for the manner in which references are listed.

#### **Important Notes:**

- **Please ask instructors for project examples.**
- Firearms or ready to shoot bows are not allowed to be exhibited. Unstrung bows are permissible.
- Live ammunition is not allowed to be exhibited (no powder or primer)
- An arrow with its arrowhead attached must be displayed in a secure case. An arrowhead without the arrow attached must be displayed in a secure case. An arrow may be displayed unsecured if its arrowhead is removed. Modern broadhead arrows are not allowed to be exhibited.
- Displays involving firearms or bows may be exhibited as a photographic display on a poster or in a notebook following grade level guidelines.
- Handmade items must include information explaining how the project was made and its intended use. Photos are encouraged.

If you have questions about exhibit topics/projects; ask your discipline leader!

#### **Grades 3-5: (May have 1 State Fair entry per grade level)**

Display a poster showing what was learned in the 4-H Shooting Sports project.

#### **Grades 6-8: (May have 1 State Fair entry per grade level)**

Choose one of the following options. Exhibits **MUST** meet the size restrictions or be presented in a notebook.

1. Poster
2. Small project or model item may be created instead of poster, notebook or display.
3. Notebook, showing how a shooting sports item was made, or project completed.

#### **Grades 9-12: (May have 1 State Fair entry per grade level)**

Choose one of the following options.

1. Poster
2. Project or model {any size}
3. Notebook, showing how a shooting sports item was made, or project completed.

**Independent Study: Grades 9 12:** (May have 1 State Fair entry per grade level) Advanced topic- Learn all you can about an advanced shooting topic and present it on a poster and/or in a notebook. Include a short manuscript, pictures, graphs, and list the works cited to describe what you did and what you learned. Title your poster, "Advanced Shooting Sports-Independent Study".

Mentoring-Exhibit a poster that shows how you mentored a younger 4-H member. Include your planning, the time you spent, the challenges and advantages of mentoring, and how the experience might be useful in your life. Photographs and other documentation are encouraged. Title your poster, "Advanced Shooting Sports-Mentor".

SUMMARY OF PROJECT REQUIREMENTS:

1. **Record sheets are suggested to complete to develop life skills, answer judge's questions and for scholarship applications.**
2. **Attend discipline meetings/ activities as required (must attend three shooting practices prior to competition) to be eligible to shoot in competition.**
3. Prepare and bring exhibit to fair. (Must exhibit in each discipline that you enroll in.)
4. Act in a safe and responsible manner and have FUN!
5. **To be eligible to receive awards for competition, you must complete the above requirements.**

KEEP RECREATIONAL SHOOTING A FUN, ENJOYABLE ACTIVITY FOR ALL

## 2025 DEARBORN COUNTY 4-H SAFE DATES

Hunters Education-must attend both dates to complete certification. Hunters Education class is not mandatory to participate in shooting sports project. For more information contact Greg Green at 812-655-1354 or Cari Green at 513-266-9361.

Friday February 28	6:00-9:00pm	Hunters Education	Agner Hall
Saturday March 1	9:am-4:00pm	Hunters Education	Agner Hall

**\*\*All practices from October 1-May 31 count towards competition attendance requirements**

Saturday October 5-6, 2024	6:00 pm	Outdoor Skills Camping Trip
Saturday October 12, 2024	9:00 am	Range Practice
Saturday October 19	6:00 pm	Range Bonfire
Saturday November 2, 2024	9:00 am	Outdoor Skills Oxbow
Saturday November 9, 2024	9:00 am	Turkey Shoot
<b>2025 DATES</b>		
Saturday January 18	10:00 am	Outdoor Skills North Dearborn Library
Saturday February 8	10:00 am	Outdoor skills Lawrenceburg Library
Saturday March 8	9:00 am	Range Clean-Up
Saturday March 15	9:00 am	Range practice
Saturday March 22	10:00 am	Outdoor Skills
Saturday March 29	9:00 am	Range practice
Saturday April 5	10:00 am	Outdoor Skills
Saturday April 12	9:00 am	Range practice
Saturday April 26	9:00 am	Range practice
Saturday May 10	9:00 am	Range practice
Saturday May 17	9:00 am	Range practice
Saturday May 24	9:00 am	Range Competition Outdoor Skills
Saturday May 31	9:00 am	Range Make-Up Range Competition
Saturday June 7	9:00 am	Range Competition

### OTHER DATES

April 4-6, 2025 [all disciplines]		4-H Shooting Sports Instructor Certification Training
September 5, 6, & 7 [all disciplines and coordinators]		4-H Shooting Sports Instructor Certification Training
Wednesday June 11	9:00 am	Fair Set-Up Agner Hall
Wednesday June 11	6:00 pm	Fair Set-Up Livestock
Saturday June 14	9:00-11:30 am	Project check-in and judging
Friday June 20		Help cook Dinner
Saturday/Sunday June 21-22		Fair Clean-Up, Agner Hall and Livestock

## JUNE 16-20, 2025 DEARBORN COUNTY FAIR DATES

### INSTRUCTORS

#### **Administration & Communication**

Kasie Newman      812-907-0984      [kasienevman0507@yahoo.com](mailto:kasienevman0507@yahoo.com)

#### **Archery**

Criss Green      812-637-3905/513-403-2774(cell)

Adam Tippin      865-789-9555

#### **Muzzleloader:**

Earl Shuter      812-584-8411

#### **Shotgun:**

Robin Newman      812-907-0985

Mike Slayback      513-444-7950

#### **Rifle**

Greg Green      812-655-1354

Mike Slayback      513-444-7950

#### **Pistol:**

Cari Green      513-266-9361

#### **Outdoor Skills:**

Cari Green      513-266-9361

Greg Green      812-655-1354

## DEARBORN COUNTY 4-H SAFE RECORD SHEET

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_/\_\_\_\_/\_\_\_\_ GRADE: \_\_\_\_\_

TOTAL YEARS COMPLETED IN 4-H: \_\_\_\_\_ (include this year)

YEARS COMPLETED IN SHOOTING SPORTS: (include this year)

ARCHERY \_\_\_\_\_

MUZZLELOADER \_\_\_\_\_

SHOTGUN \_\_\_\_\_

RIFLE \_\_\_\_\_

PISTOL \_\_\_\_\_

OUTDOOR SKILLS \_\_\_\_\_

**You need a SEPARATE record  
sheet for EACH shooting sports  
discipline you take!!!**

TOTAL NUMBER OF SHOOTING SPORTS DISCIPLINE TRAININGS OFFERED: \_\_\_\_\_

TOTAL NUMBER OF SHOOTING SPORTS DISCIPLINE TRAININGS ATTENDED: \_\_\_\_\_

DATE	ACTIVITY & ACCOMPLISHMENTS
1	_____
2	_____
3	_____
4	_____
5	_____
6	_____
7	_____
8	_____
9	_____
10	_____

**4-H MOTTO**  
"TO MAKE THE BEST BETTER"

**4-H SHOOTING SPORTS MOTTO**  
"LEARN BY DOING"

**4-H PLEDGE**  
I PLEDGE: MY HEAD TO CLEARER THINKING  
MY HEART TO GREATER LOYALTY  
MY HANDS TO LARGER SERVICE  
MY HEALTH TO BETTER LIVING

FOR MY CLUB, MY COMMUNITY, MY COUNTRY AND MY WORLD  
Insert into green record book & turn in at fair



**MY PERSONAL GOALS, OBJECTIVES OF SAFE**

THINGS I WOULD LIKE TO LEARN MORE ABOUT: (list & explain)

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THINGS I WOULD LIKE TO DO: (list and explain)

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WHAT I LEARNED THIS YEAR IN SAFE: (list & explain)

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\_\_\_\_\_  
DATE

\_\_\_\_\_  
4-H MEMBERS SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
4-H PROJECT LEADER'S SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
4-H PARENT'S SIGNATURE

(Insert in green record book and turn in at fair)

**4-H SAFE**

### MEDICAL PARENTAL PERMISSION SLIP

In case of an accident, the 4-H Directors are requiring that each 4-H member that plans on attending the 4-H Shooting Sports shoots have a Medical Parental Permission Slip completed. This form will allow the nearest medical facility personnel to provide emergency treatment. This permission slip is to include the admission to the nearest medical facility, if possible, or to another local hospital if it is considered a medical risk following an emergency treatment and evaluation.

In the event of an accident, parents will be notified. The Medical Parental Permission Slip will be used if a parent cannot be reached and/or the ambulance arrives at the hospital before the parents.

I hope you will understand that this form is for the protection of the 4-H members at the shooting range and is what is required by nearest medical facility.

I, \_\_\_\_\_, give my permission to the nearest medical personnel and hereby consent to emergency treatment of my children listed below. I further consent to the rendering of aid and care, including diagnostics procedures by authorized members of the hospital staff as may in their professional judgment be necessary.

Name                      Birthdate      Allergies Last Tetanus Current Medications

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The following information may be needed for hospital records:

Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Insurance information: \_\_\_\_\_

Responsible party: \_\_\_\_\_

Address: \_\_\_\_\_

Occupation: \_\_\_\_\_

Type: \_\_\_\_\_ Effective date: \_\_\_\_\_

Place of employment: \_\_\_\_\_

Dentist: \_\_\_\_\_ Phone: \_\_\_\_\_

\_\_\_\_\_  
(PARENT OR LEGAL GUARDIAN SIGNATURE)

\_\_\_\_\_  
(PRINT NAME)

\_\_\_\_\_  
(BEST EMERGENCY CONTACT CELL OR LANDLINE)

**HEALTH FORM  
(Youth)**

**Attach current photo here.  
Photo will not be returned.**

\_\_\_\_\_  
Event/Activity/Trip

\_\_\_\_\_  
County

\_\_\_\_\_  
Dorm and/or Room Number

\_\_\_\_\_  
Name

\_\_\_\_\_  
Birthdate

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
ZIP code

(\_\_\_\_\_) \_\_\_\_\_  
Day Phone Number

\_\_\_\_\_  
Evening Phone Number

\_\_\_\_\_  
Youth Cell Number (if applicable)

List any activities the participant should avoid (i.e., swimming):

Physical Record of Participant

Yes

No

Heart Condition

\_\_\_\_\_

\_\_\_\_\_

Diabetes

\_\_\_\_\_

\_\_\_\_\_

Ear Infections

\_\_\_\_\_

\_\_\_\_\_

Bedwetting

\_\_\_\_\_

\_\_\_\_\_

Allergy to any medication

\_\_\_\_\_

\_\_\_\_\_

List medicines allergic to: \_\_\_\_\_

Food allergy or dietary restrictions

\_\_\_\_\_

\_\_\_\_\_

List allergies/restrictions \_\_\_\_\_

Other allergies (i.e., dust, pollen, animals)

\_\_\_\_\_

\_\_\_\_\_

List other allergies \_\_\_\_\_

Date of last tetanus shot: \_\_\_\_\_

**Please list any current medication being taken on reverse side of this form.**

Please describe any current physical, mental, or psychological conditions requiring medication, treatment, or special restrictions or considerations that would be beneficial during 4-H participation:

**PARENTAL AUTHORIZATION**

Pursuant to Indiana Code Paragraph 16-36-1-6 and subject to any limitations listed below, I request and authorize Purdue University Cooperative Extension Service employees and their authorized agents to arrange for all reasonably necessary medical care, including transportation and hospitalization, for my child while in attendance at and participating in 4-H Youth Development events and activities.

I also understand that, as a result of my child's participation in this program, it will be necessary for Purdue CES employees and other authorized personnel with the program to have access to relevant medical information pertaining to my child, and I authorize the use and disclosure of my child's medical information to promote a safe and healthy experience for my child.

\_\_\_\_\_  
Parent/Legal Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness to Parent/Legal Guardian

\_\_\_\_\_  
Date

Parent/Guardian Telephone: (\_\_\_\_\_) \_\_\_\_\_  
Home

(\_\_\_\_\_) \_\_\_\_\_  
Work

**Both above signatures required for acceptance to participate**

In case we cannot reach you, please list the name and phone number of a second party to contact:

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone: (\_\_\_\_\_) \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
Home Work

**Please complete the addendum on reverse side**

## ADDENDUM TO THE 4-H YOUTH HEALTH FORM

Complete this form if **prescription medications** are being taken by the student at the time of the event or if **over-the-counter medication** is to be administered by an Extension staff member or other authorized personnel.

**Medications must be carried in their original containers.**

County: \_\_\_\_\_

4-H member's Name: \_\_\_\_\_

Name of Medication: \_\_\_\_\_

What Illness/Condition is this medication intended for: \_\_\_\_\_

Check all of the following that apply:

\_\_\_\_\_ Tylenol/Ibuprofen may be administered by 4-H Youth Development event personnel

\_\_\_\_\_ Benadryl may be administered by 4-H Youth Development event personnel

\_\_\_\_\_ Medication is to be self administered by student

\_\_\_\_\_ Medication is to be administered by 4-H Youth Development event personnel

Youth's weight: \_\_\_\_\_ lbs.

Dosage: \_\_\_\_\_ Refrigeration? Yes \_\_\_\_\_ No \_\_\_\_\_

Special Instructions: \_\_\_\_\_

Other information (if applicable): \_\_\_\_\_

Date(s) to Administer: From \_\_\_\_\_ To \_\_\_\_\_

Prescribing Doctor's Name: \_\_\_\_\_ Phone: (    ) \_\_\_\_\_

**Note: This form is to be used as a reference for 4-H participants who require any medication (prescription or "over-the-counter"). Administering of the medication is the responsibility of the participant. If health facilities and/or personnel are available at the facility and you prefer the trained personnel to administer the medication, you may request this prior to the event.**

Event: \_\_\_\_\_ Date (s): \_\_\_\_\_

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

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date