MEMORANDUM

TO: Bexar County 4-H Shooting Sports Participants

FROM: Natalie Cervantes

County Extension Agent – Ag. & Natural Resources

SUBJECT: 2016 District 10 4-H Small Bore Rifle Contest

DATE: Saturday, April 16, 2016

LOCATION: Wilson County Fairgrounds, Floresville, Texas

District 10 will be conducting the 4-H Smallbore Rifle Contest on Saturday, April 16, 2016 at the Wilson County Fairgrounds in Floresville. This is an Indoor – 50 foot competition.

A concession stand will be provided the day of the contest. We ask that you patronize that concession stand as a gesture of “thanks.”

DISTRICT REGISTRATION:
Regular Registration will be held March 21st - 30th on 4-H Connect, registration fees will be $10.00 per individual. Late Registration will be held March 31st - April 1st, $35.00 per person ($10 regular entry, plus $25 late fee) no late entries will be accepted after this deadline.

Each individual member must register on 4-H Connect

Each Coach must send us a list of their teams/individuals by March 24th

DIVISIONS:
There will be four divisions. Division is determined by the 4-Hers grade as of August 31, 2015.

• Junior – 3rd-5th Grade
• Junior Intermediate – 6th-7th Grade
• Intermediate – 8th Grade
• Senior – 9th-12th Grade

TEAM/INDIVIDUAL:
Counties may enter as many teams as they wish in each age division. Junior, Junior Intermediate, Intermediate and Senior age divisions may enter up to two (2) individuals in the contest and individuals will be eligible for high point individual awards.

Educational programs of the Texas A&M AgriLife Extension Service are open to all people without regard to race, color, religion, sex, national origin, age, disability, genetic information or veteran status.

The Texas A&M University System, U.S. Department of Agriculture, and the County Commissioners Courts of Texas Cooperating
CONTEST SCHEDULE:
A shooting schedule will be sent to counties after registration has closed and all entries have been compiled.

EQUIPMENT/ MATERIALS:
Contestants/ counties will be required to provide their own firearms and ammunition.
• Any rifle - Rifle must conform to NRA 3.2 rule. Any safe .22 caliber rimfire rifle chambered for .22 Short, .22 Long or .22 Long Rifle cartridges may be used in Smallbore 3-position Rifle competitions. No restriction is placed on barrel length or overall weight of the rifle and accessories. No part of the rifle or any attachment may extend more than three (3) inches (7.62 cm) beyond the rear of the shooter's shoulder. Triggers must not be subject to accidental discharge. The same rifle must be used throughout a match except in the case of malfunction or a disabled rifle. In either event the competitor may change rifles with the permission of the range officer.
• Ammunition - At least 100 rounds per contestant for sighting and scoring. Only standard or high velocity .22 rimfire ammunition commercially cataloged as .22 Short, .22 Long or .22 Long Rifle ammunition with an overall length of not more than 1.1 inches, a lead or alloy bullet no larger than .23 inches in diameter and a weight of no more than 40 grains may be used. (Match, target or standard velocity ammunition will give the best accuracy and precision in most firearms.) No hollow points are allowed.

Eye and Ear Protection – Required for everyone on the range including competitors, coaches and range officer.

Rifle rests - Seniors and Intermediates are recommended to use rifle rests between firing in the standing position.

TARGETS:
Orion targets will be used for all Senior, Intermediate, Junior Intermediate, and Junior competitors.

Targets will be provided for each team member, for each firing position. You do not need to bring targets.

Targets will be coded and distributed to the coach at the registration held immediately prior to the start of the contest.

SCORING:
Scoring will be done by the Orion Electronic Scoring system. Team scores will consist of the three highest scores in each position (dropping the lowest score per position per 4 person team). Any cross-over shots, excessive shots or sighting shots out of sighting bulls, etc. must be verified and initialed by the range officer before the target is removed from the backstop. Once removed from the backstop, special consideration will not be given. It is the responsibility of the coach to verify these irregularities and bring them to the attention of the range officer at the time of occurrence and to have the range officer make a notation on the target before it is removed from the backstop. Also, contrary to State Rifle Contest Rules which enforces NRA Rule 9.8B, stating basically “participants will go for the record shots once a sighter is out of the sighter ring”, the District will not enforce the rule but coaches must report sighters out of the ring to the range officer.

The decision on scoring challenges will accomplished using the “protest” feature in the Orion system, not using a plug as stated in NRA rule 10.10.6.1.

AWARDS:
Awards will be presented after scores have been tabulated following the contest.
LIABILITY FORM:
A liability form (included in this letter) will be required for every participant. It must be completed and signed by both the contestant and the parents prior to participation. **This form must be turned into our office by Monday, March 28th, 2016.**

RANGE OFFICER:
The range officer will run the range, monitor safety and conduct, verify targets and assist shooters as necessary. The range officer will make note of cross-over shots, excessive shots, sighting shots out of sighting bull or other irregularities at the time they occur and make notations on targets to facilitate the scoring process. The range officer will receive protests and make a decision on whether or not to uphold the protest. He may choose to consult with the head scorer to pass judgment on a protest concerning scoring.

SAFETY:
All firearms, whether being carried, at rest in vehicles near the range, or at rest, will be unloaded and will have bolts open except when on firing line in the process of firing. All firearms are required to have “open bolt indicators” (OBI’s) until called to firing point and preparation time, when a match is completed and when cease fire is called. All rifles will remain in a case or appropriate rifle stand at all times until the participants are instructed by the range officer to take them to the firing line. A total of four coaches will be allowed on the firing line with each four-member team. **A safety committee consisting of one person per participating county will be appointed by the safety committee chairpersons prior to the contest, with three persons on duty at any one time. It will be the responsibility of these persons to monitor the safe conduct and handling of firearms of all persons present in and around the contest location and to either immediately correct the situation or report the infraction to the range officer.**

CONDUCT:
Violation of accepted rules of safety and conduct on the range will, at the discretion of the range officer, disqualify a contestant, or in the case of a coach, result in the removal of the coach from the firing line.

DISTRICT RULES:
The following rules have been set by the District Shooting Sports Committee:
1) Coaches will be responsible for safety of equipment (e.g., Trigger pull); however, the selected range officer will have the authority to deem something unsafe and make corrections at time of the contest.

2) NRA rules will be followed except as noted. **State rules apply at District Contest.**

3) Adequate and appropriate eye and ear protection is required for all persons on the firing line during live firing at all 4-H shooting sports events and activities at all levels (state, district, county and club) with the following exceptions.

4) There will be a charge of $1.00 per challenge of target scoring. Juniors, Junior Intermediates, and Intermediates will be allowed to have a coach present during the challenge. Senior shooters must challenge by themselves.

DISTRICT ACADEMIC ELIGIBILITY FORM:
The academic eligibility form is due to our office by **Friday, April 8th.** Eligibility form is enclosed in this letter.
Firing Positions for each age division are as follows:

<table>
<thead>
<tr>
<th>Division</th>
<th>Prone Targets</th>
<th>Kneeling Targets</th>
<th>Standing Targets</th>
<th>Time Allotted</th>
</tr>
</thead>
<tbody>
<tr>
<td>Junior 3rd-5th Grade</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>30</td>
</tr>
<tr>
<td>Junior Intermediate 6th-7th Grade</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>45</td>
</tr>
<tr>
<td>Intermediate 8th Grade</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>45</td>
</tr>
<tr>
<td>Senior 9th-12th Grade</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>90</td>
</tr>
</tbody>
</table>

If you have any questions concerning this contest, please contact Natalie (ntcervantes@ag.tamu.edu) or Sam (s-womble@ag.tamu.edu) at 210/631-0400.
CAMP & ENRICHMENT PROGRAM WAIVER, INDEMNIFICATION, AND MEDICAL TREATMENT AUTHORIZATION FORM

EXCUSATORY CLAUSE. In consideration for receiving permission for my/my child’s participation in any and all activities of Texas 4-H Events (herein referred to as “camp”), which is sponsored by Texas A&M AgriLife Extension Service and Texas 4-H and Youth Development Program, (herein referred to as “sponsor”), I hereby release, waive, discharge, covenant not to sue, and agree to hold harmless for any and all purposes sponsor, The Texas A&M University System, the Board of Regents for The Texas A&M University System, Texas AgriLife Extension Service, Texas 4-H and Youth Development Program, Texas 4-H Youth Development Foundation, Texas A&M University, and their members, officers, servants, agents, volunteers, or employees (herein referred to as RELEASEES or INDEMNITNEES) from any and all liabilities, claims, demands, injuries (including death), or damages, including court costs and attorney’s fees and expenses, that may be sustained by me/my child while participating in such activity, while traveling to and from the activity, or while on the premises owned or leased by RELEASEES, including injuries sustained as a result of the sole, joint, or concurrent negligence, negligence per se, statutory fault, or strict liability of RELEASEES. I understand this waiver does not apply to injuries caused by intentional or grossly negligent conduct.

INDEMNITY CLAUSE. I am fully aware that there are inherent risks to my child, myself, and others involved with this activity, including but not limited to all events and activities, and I choose to voluntarily participate/allow my child to participate in said activity with full knowledge that the activity may be hazardous to me, my child and my property, and to the person and property of others. I acknowledge there may be physically strenuous activities. I know of no medical reason why I/my child should not participate. I agree to indemnify and hold harmless INDEMNITNEES from any and all liabilities, claims, demands, injuries (including death), or damages, including court costs and attorney’s fees and expenses, which may occur to myself, my child, other participants, and third-persons as a result of my/my child’s participation in said activity, including injuries sustained as a result of the sole, joint, or concurrent negligence, negligence per se, statutory fault, or strict liability of INDEMNITNEES.

NO INSURANCE. I understand that RELEASEES may or may not maintain any insurance policy covering any circumstance arising from my/my child’s participation in this activity or any event related to that participation. As such, I am aware that I should review my personal insurance coverage. Organization may not carry general liability insurance to cover claims arising from this activity so it seeks a waiver of claims as additional consideration for the right to participate in this organization, can (a) provide the activity at the lowest possible cost to participants; and (b) provide access to a greater number of participants by expending limited resources on program materials rather than on liability insurance.

BINDS HEIRS. It is my express intent that this agreement shall bind the members of my family and spouse, if I am alive, and my heirs, assigns and personal representatives, if I am deceased, and shall be governed by the laws of the State of Texas.

MEDICAL AUTHORIZATION, INDEMNITY FOR MEDICAL EXPENSES, and WAIVER. I understand RELEASEES cannot be expected to control all of the risks articulated in this form and RELEASEES may need to respond to accidents and potential emergency situations. Therefore, I hereby give my consent for any medical treatment that may be required, as determined by a medical professional at the medical facility, during my/my child’s participation in this activity with the understanding that the cost of any such treatment will be my responsibility. I agree to indemnify and hold harmless INDEMNITNEES for any costs incurred to treat me/my child, even if an INDEMNITNEE has signed hospital documentation promising to pay for the treatment due to my inability to sign the documentation. I further agree to release, waive, discharge, covenant not to sue, and agree to hold harmless for any and all purposes, RELEASEES from any and all liabilities, claims, demands, injuries (including death), or damages, including court costs and attorney’s fees and expenses, that may be sustained by me/my child while receiving medical care or in deciding to seek medical care, including while traveling to and from a medical care facility, including injuries sustained as a result of the sole, joint, or concurrent negligence, negligence per se, statutory fault, or strict liability of RELEASEES. I understand this waiver does not apply to injuries caused by intentional or grossly negligent conduct.

VOLUNTARY SIGNATURE. In signing this agreement I acknowledge and represent that I have read it, understand it, and sign it voluntarily as my own free act and deed; sponsor has not made and I have not relied on any oral representations, statements, or inducements apart from the terms contained in this agreement. I execute this document for full, adequate and complete consideration fully intending to be bound by the same, now and in the future. I understand I can choose not to sign this document and free myself and my child from its terms and the associated risks of the activity by simply not participating in the activity and choosing some other activity available to me/my child that has a lower level of risk to myself and my child. I further understand this is a voluntary, extracurricular activity. While I understand alternative activities are available to me/my child that do not have the risks associated with this activity I still desire to voluntarily engage/permit my child to engage in this activity.

SIGNING THIS DOCUMENT IN Volves THE WAIVER OF VALUABLE LEGAL RIGHTS. CONSULT YOUR ATTORNEY BEFORE SIGNING THIS DOCUMENT.

<table>
<thead>
<tr>
<th>Participant Signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participant Printed Name</td>
<td>Participant Date of Birth</td>
</tr>
<tr>
<td>If participant is 18 years old or younger:</td>
<td></td>
</tr>
<tr>
<td>Parent/Legal Guardian Signature</td>
<td>Date</td>
</tr>
<tr>
<td>Parent/Legal Guardian Printed Name</td>
<td></td>
</tr>
<tr>
<td>In case of emergency, contact:</td>
<td>Phone</td>
</tr>
<tr>
<td>or</td>
<td>Phone</td>
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<tr>
<td>or</td>
<td>Phone</td>
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</tbody>
</table>

If the participant has medical insurance, please indicate:

<table>
<thead>
<tr>
<th>Insurance Company</th>
<th>Policy Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Primary Policy Holder</td>
<td></td>
</tr>
<tr>
<td>Please list any special services your child may require:</td>
<td></td>
</tr>
</tbody>
</table>
MAP TO WILSON COUNTY FAIRGROUNDS

To get driving directions from your location go to: www.mapquest.com

- Select “Directions”
- Put in your starting location
- Put in destination location of 435 State Highway 97 E, Floresville, TX 78114
- Print your map and directions
Texas A&M AgriLife Extension Service
DECLARATION OF ELIGIBILITY FORM

This form is requested in accordance with the requirement of the Texas Education Code and in cooperation with the Texas Education Agency and local public school board policies.

PARENT/GUARDIAN/COUNTY EXTENSION AGENT – Complete This Section

In accordance with 4-H policy, provided by our local Extension office, I respectfully request (check [✓] one):

[✓] Academic eligibility information only

[ ] Academic eligibility information and authorization to receive an excused absence from school

Date: April 16, 2016 Name of Activity: District 10 4-H Small Bore Rifle Contest

Signature of Parent/Guardian: ________________________________

I hereby certify that ________________________________ is a member of 4-H in Bexar County and is scheduled to participate in this activity representing 4-H. He/she will be under the supervision of the Texas A&M AgriLife Extension Service faculty or agency’s designated volunteer leader.

Date: February 12, 2016 County Extension Agent: Natalie Cavasile

PRINCIPAL – Complete This Section

Check [✓] one:

[ ] I do certify that the student is academically eligible to participate in the above mentioned extracurricular activity.

[ ] I do not certify the student because he/she is NOT academically eligible to participate in the above mentioned extracurricular activity.

Check [✓] one:

[ ] An excused absence will be granted.

[ ] An excused absence will not be granted.

[ ] Does not apply.

Signed: ________________________________ Date: ________________________________

Principal or Designee

Name of School: ________________________________

Instructions: 4-H member should return original form to the County Extension Office. Return to: Bexar County 4-H, 3355 Cherry Ridge, #212, San Antonio, Texas 78230. Schools requiring a copy of this form should make a copy before returning it to the student. 4-H members should also make a copy for their file before returning it to the County Extension Office.