St. Charles Parish 4-H Shooting Sports Registration (2026-2027)

Please print!

Student's Name: _____

Student's Mailing Address: _____

City: _____ State: LA Zip Code: _____

Cell Phone: _____ Home Phone: _____

Student's Email Address: _____

Parent's Email Address: _____

Birthdate: ____/_____/____ Grade: _____ School: _____

Member T-shirt Size (Adult sizes) _____ Circle One: Junior (Ages 10 – 13) Senior (Ages 14 – 19)

Parent/Guardian Name: _____

Parent/Guardian Cell Phone: _____ Work: _____

Secondary Emergency Contact Name: _____ Phone: _____

Choose your discipline(s) by placing a check in the blank below.
(If you plan to participate in more than one discipline, rank them in order of preference with #1 being your first preference.)
_____ Archery _____.22 Rifle

Hunter's Education Certification (Select one.)
*Note: You must provide a copy of your certification before attending any practice.
_____ Yes, I have my Hunter's Education certification and will provide a copy of my card.
_____ No, I do not have my Hunter's Education certification but plan to attend classes. (See Handbook)

REGISTRATION INFORMATION:
Must be **received** by **November 20, 2026**, to
Ms. Tracy Adams, LSU AgCenter Administrative Coordinator
Physical Address: 453 Spruce Street in Norco, La.
Mailing Address: P.O. Box 557, Norco, LA 70079
Phone: (985) 785-4473
tracyadams@agcenter.lsu.edu
Office Hours: Monday – Friday
(8:00 a.m. – 12:30 p.m.; 1:00 p.m. - 4:30 p.m.)

Driving Permission Slip (Select only if applicable.)
*Note: Youth at least 18 years of age must provide a copy of their driver's license and complete this section for permission to drive to practices and meetings ONLY without a parent. Youth under 18 years of age cannot be present at the range without a guardian present. Rules for matches will be specified in the Handbook and Event Guidelines.
____ Yes, my child _____ has a government issued driver's license and is licensed to drive without an adult present. I am giving my child permission to drive to and from practices and meetings ONLY and acknowledge that I am still responsible for him/her. (If under 18, youth cannot be present at range without a guardian.)

_____ _____ _____
Print Parent's Name | Parent's Signature | Parent's Primary Contact Phone Number

FOR OFFICE USE ONLY: Registration Fee $20 (Payable to "St. Charles 4-H") CK# _____Date: _____ Amount: _____

Registration Form ____ 4-H Online Enrollment____ Parental Permission ____ Participant Agreement ____ Health Form____

Hunter's Ed Certification Copy: YES NO (MUST HAVE before attending ANY practice)

Driver's License Copy: YES NO (MUST HAVE before driving to practice) **Range Waiver (2 copies per person) _____**

St. Charles Parish Cooperative Extension Service

P. O. Box 557, 453 Spruce Street . Norco, LA 70079 . Office: 985-785-4473
www.LSUAgCenter.com
The LSU AgCenter provides equal opportunity in programs and employment.

St. Charles Parish 4-H Shooting Sports
Parental Permission Form

Waiver of Liability

(Form must be completed before 4-H'er can participate in the Shooting Sports Club.)

I, the parent (legal guardian) of _____(Name of 4-H'er) grant permission for his/her participation in the 4-H Shooting Sports Club; and approve of the use of firearms, ammunition, and/or archery euqipment while participating under the supervision of a 4-H Certified Shooting Sports Instructor. I understand that the shooting sports are potentially hazardous activities, and certain risks are involved with this activity. These potential hazards include gunshot or archery wounds and can result in paralysis, loss of vision, limb or life. I agree that participation in this activity is entirely voluntary and agree that I will not hold the 4-H Project Leaders, State 4-H Staff, local extension staff or the LSU AgCenter liable for any accidents.

I understand that there may be trustees on the premises at the range during practice sessions.

I understand that safety procedures and practices will be strictly adhered to and that our child (guardian) may be immediately expelled, without recourse, from the program as a result of horseplay, inattentiveness, inappropriate conduce, violation of safety rules or failure to follow the range officer's directions.

I will abide by all safety procedures with the possibility of being expelled from the program if I do not follow these procedures.

Signature of 4-H'er _____

Address _____

Phone Number_____

Parent/Guardian's Signature _____Date_____

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St. Charles Parish 4-H Shooting Sports Club
Participation Agreement

My child, _____, has my permission to participate in the **St. Charles Parish 4-H Shooting Sports Program.** It is required that I pay $20.00 club dues in addition to supplying my child with the required equipment necessary for participation in the program. I agree to meet all requirements for participation in the program as stated in the 4-H Shooting Sports Handbook. Each child is financially responsible for any expenses that they may acquire due to participation in the program. I also understand that my child must have a parent/guardian present at all practices and events and that we are responsible for transportation to and from events. In case of an accident, illness, or emergency, I am responsible for all fees.

My child is agreeing to participate in the above-mentioned program. My child and I have received, read, understand, and agree to obey all rules and regulations as stated in the 4-H Code of Conduct, Parish Program Rules, and 4-H Shooting Sports Handbook.

By signing below, I acknowledge that I agree with the statement above and will abide by the conditions of this event.

_____ _____
Signature of 4-H Member Date

By signing below, I give my child permission to participate in the above listed event for St. Charles 4-H.

_____ _____
Signature of Parent/Guardian Date

St. Charles Parish Sheriff's Office
260 Judge Edward Dufresne Parkway
Luling, Louisiana 70070

Greg Champagne
Sheriff and
Ex-Officio Tax Collector

Release of Liability Form for Citizens' Firing Range Use

I wish to participate in the Citizens' Firing Range Day provided by the St. Charles Parish Sheriff's Office which has been made available to me for my convenience by Sheriff Greg Champagne. I understand that any form of firing range activity may cause serious injury and that I must abide by any and all instructions of the Range Master at all times. In addition, I understand that I must be proficient in the safe use of firearms to participate in this firing range activity and that I am responsible for my own safety as well as safety of others around me including any juvenile I bring to participate in this activity. I further understand that any juvenile I bring to the firing range must be accompanied by a parent or legal guardian and must be supervised by that parent or guardian.

I understand that the risk of injury from firing range activity is significant including the potential for permanent paralysis and death; I knowingly and freely assume all such risks both known and unknown. I acknowledge that I assume all risks associated with participating in this firing range activity and I understand that the St. Charles Parish Sheriff's Office administering this activity includes the St. Charles Parish Louisiana Law Enforcement District, a political subdivision of Louisiana, and Sheriff Greg Champagne of the St. Charles Parish Sheriff's Office, hereinafter "S.C.S.O." collectively. I hereby release, indemnify, and hold harmless S.C.S.O. and its agents and employees with respect to any and all injury, disability, death, loss or damage to person or property that may arise out of or in connection with the firing range activity administered by S.C.S.O. regardless of S.C.S.O.'s negligence or strict liability.

I expressly agree that this release is intended to be as broad and inclusive as permitted by applicable law and if a portion of this release is held invalid, the balance shall remain in full force and effect. This release shall apply to my child or juvenile for which I am guardian, heirs, assigns, personal representatives and any other next of kin. I understand that S.C.S.O. is relying on this release in agreeing to provide the use of its firing range.

I have read the Release of Liability Form, fully understand its terms and that I have given up substantial rights by signing it, and sign it freely and voluntarily without any inducement.

_____ 01/01/27

Participant's and/or Guardian's Name (signature) Date (mm/dd/yy)

_____

Participant's and/or Guardian's Name (print)