Nevada 4-H Shooting Sports
Risk Management Plan
(Revised May, 2009)

This Risk Management Plan must be completed (each year, year is defined as 4-H Club Year, which is from October 1 to September 30) by each 4-H Shooting Sports Club before any instruction (classroom or range) is provided to 4-H Club Members.

A copy of this Risk Management Plan must remain with the 4-H Club. A copy of this Risk Management Plan must be filed with the County UNCE/4-H Office. The County UNCE/4-H Office must submit a copy to the State 4-H Office.

Each County UNCE/4-H Office sets the due date for this form for their County Program. These forms are due to State 4-H Office by December 1 of each 4-H Year.

Name of 4-H Club:________________________________________________________

County of 4-H Club:_______________________________________________________

4-H Club Year for this Risk Management Plan: Oct 1, _________ to Sept 30, _________

Each 4-H Club has a Key Leader (someone who has the overall responsibility and leadership role of the club). Therefore, this person also has the duty of completing this Risk Management Plan and returning it in a timely manner to the County 4-H Office.

Name of Key Leader of this 4-H Club:_______________________________________

Address of Key Leader of this 4-H Club:_____________________________________

Email Address of Key Leader of this 4-H Club:_______________________________

Home Phone Number of Key Leader of this 4-H Club:_________________________

Cell Phone Number of Key Leader of this 4-H Club:___________________________
The 4-H Shooting Sports Disciplines taught by this 4-H Club include (please circle):

- Muzzleloader
- Shotgun
- Rifle
- Pistol
- Archery
- Hunting

Given that National 4-H and State 4-H Guidelines state that all 4-H Shooting Sports activities shall be organized and conducted with at least one 4-H Certified Shooting Sports Instructor present. Furthermore, this 4-H Certified Shooting Sports Instructor must be certified in the discipline being taught. Therefore, please list all of the 4-H Certified Instructors who teach for this 4-H Club. (Note: for each discipline circled in the previous section, there must be at least one 4-H Certified Instructor listed below.) If necessary, please feel free to duplicate and add as many pages as needed.

<table>
<thead>
<tr>
<th>Name</th>
<th>Phone</th>
<th>Discipline(s)/year of certification</th>
</tr>
</thead>
</table>
4-H Shooting Sports is open to all 4-H Youth (without regard to race, color, religion, gender, creed, marital status, national origin, disability, or sexual orientation). However, the following materials and information must be completely filled out and returned to the County UNCE/4-H Office before the youth is allowed to participate.

- Nevada 4-H Member Enrollment Form (county records only)
- Nevada 4-H Health Form (copy for club and for county records)
- Nevada 4-H Code of Conduct Form (county records only)
- UNCE Assumption of Risk Form (county records only)

Either, I (as the Key Leader for this 4-H Shooting Sports Club) or my designee (please print their name) __________________________ will make sure the above listed information is completed by all youth participants in this 4-H Shooting Sports Club and that above listed information is properly turned in to the County UNCE/4-H Office.

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<tr>
<th>Signature of Key Leader or Designee</th>
<th>Phone</th>
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Given that the person completing this form is a 4-H Certified Shooting Sports Instructor (otherwise they would not be completing this form), it is also a given that this person knows and understands they educational expectations (such lesson plans for each session, ear and eye protection, range commands, having a person with current First Aid and CPR Training present at all shooting activities, having a First Aid kit at all activities, youth participation, and so on) of the 4-H Shooting Sports Program. Therefore, my completing and signing this Risk Management Plan, I (as the Key Leader for this 4-H Shooting Sports Club) agree to abide by and follow the 4-H Principles of Shooting Sports Safety and Instruction that I learned when I became a 4-H Certified Shooting Sports Instructor. I also agree to aid the other 4-H Certified Instructors of this 4-H Shooting Sports Club in abiding by and following the 4-H Principles of Shooting Sports Safety and Instruction. Furthermore, I (as the Key Leader for this 4-H Shooting Sports Club) or my designee (please print their name) __________________________ will (at the end of the 4-H Club Year, September 30, stated on Page 1 of this Risk Management Plan) complete the Nevada 4-H Club Shooting Sports Activity Planning and Reporting Form (SS05) and return this form (within two weeks of the September 30 date stated on Page 1 of this Risk Management Plan) to the County UNCE/4-H Office. The County Office will provide a copy to the State 4-H Office, which will be placed with this Risk Management Plan and be kept on file for a period of at least three years. It is also recommend for both the 4-H Club and County UNCE/4-H Office to combine these documents and keep them on file for a period of at least three years.

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Whenever any equipment is provided (by a 4-H Leader or the 4-H Program) for use by a 4-H Club Member in 4-H Club Activities (other than a 4-H Meeting), a log shall be kept. The log shall include the name of the member, who/what provide the equipment, type of equipment provided, identification/serial number of the equipment provided, and the date the equipment was provided. Items such as targets, target stands, and so on are not considered as “equipment provided for use” by a 4-H Club Member. An example of a log is provided below. This can be used by the 4-H Club as the actual log or a similar log (but all of the previously stated required information must be included) may be compiled by the club. Regardless of the log used by the 4-H Club it must be submitted to the County Office at the end of the 4-H Club Year, September 30, stated on Page 1 of this Risk Management Plan. The due date for submitting this log to the County UNCE/4-H Office shall be within two weeks of the September 30 date stated on Page 1 of this Risk Management Plan. The County Office will provide a copy to the State 4-H Office, which will be placed with this Risk Management Plan and be kept on file for a period of at least three years. It is also recommend for both the 4-H Club and County UNCE/4-H Office to combine these documents and keep them on file for a period of at least three years.

**Log of Equipment Provided/Loaned to 4-H Members for use in 4-H Club Activities**

<table>
<thead>
<tr>
<th>Joe Smith</th>
<th>Mike Jones</th>
<th>Mathews Bow</th>
<th>#3692256</th>
<th>11-16-08</th>
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</thead>
<tbody>
<tr>
<td>Club Member Name</td>
<td>Loaned By</td>
<td>Item Loaned</td>
<td>ID of Item</td>
<td>Date Loaned</td>
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<tr>
<td>Mary Issac</td>
<td>Safe Shooting 4-H Club</td>
<td>Stevens .22 Rife</td>
<td>771129</td>
<td>03-29-09</td>
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<tr>
<td>Club Member Name</td>
<td>Loaned By</td>
<td>Item Loaned</td>
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Please provide an inventory of all equipment owned by the 4-H Club completing this Risk Management Plan. Equipment includes all trailers, guns, bows, arrows, throwers, gun/bow maintenance items, and other similar items. Equipment does not include items such as targets, rifle/shotgun/muzzleloader ammunition, and so on. Perhaps the best advice that can be given about this section is; if in doubt, list the item. For most clubs, the following Inventory List will probably not provide enough space. Therefore, please feel free to duplicate and add as many pages as necessary.

### Inventory of Equipment

**Owned by the 4-H Club listed on Page 1 of this Risk Management Plan**

<table>
<thead>
<tr>
<th>Name/Type of Equipment</th>
<th>ID of Item</th>
<th>Age of Item</th>
<th>Type/Date of last Maintenance</th>
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<tbody>
<tr>
<td>Brutus Trailer</td>
<td>Lic # EX 1579 2006 Model</td>
<td>Inspected 10-10-08</td>
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<tr>
<td>Mathews Bow</td>
<td>#3692256 4 Yrs Old</td>
<td>Restrung on 02-29-09</td>
<td></td>
</tr>
<tr>
<td>First Aid Kit</td>
<td>Red Cross Model # 135 4 Yrs Old</td>
<td>Restocked on 03-06-09</td>
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Name/Type of Equipment | ID of Item | Age of Item | Type/Date of last Maintenance

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The proper storage and transportation of Shooting Sports Equipment and Supplies is an important part of having a safe program and being a responsible citizen. Therefore, it is important to follow recommended procedures from National 4-H Shooting Sports. Basic procedures include things such as having firearms and ammunition stored separately, keeping an accurate and current inventory (including make, model, and serial number of all items), controlling access to equipment (even when at the shooting range), keeping it locked when being stored or transported, making sure equipment is secure and safe when transporting, and many other similar aspects.

I have read the above storage and transportation guidelines and understand that these guidelines (as well as other storage and transportation guidelines) must be strictly followed at all times. I also agree to remind the other instructors (listed on Page 2 of this form) of these safety guidelines.

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Signature of Key Leader

Date
Safety is always paramount in 4-H, and the 4-H Shooting Sports Program is no exception. Therefore, the purpose of this section is to simply remind of basic safety procedures that must be followed during participation in 4-H Shooting Sports.

- 4-H Certified Shooting Sports Instructors must be present at all shooting activities (range instruction/shooting and/or classroom instruction) of 4-H Shooting Sports Clubs.

- Each 4-H Shooting Sports Discipline must be coordinated and taught by a 4-H Shooting Sports Instructor who is certified in that respective discipline.

- At least one person with First Aid and CPR Training (Red Cross, EMT, Nurse, Doctor, etc) must be present at all shooting activities (range instruction/shooting and/or classroom instruction).

- A properly stocked First Aid Kit must be present at all shooting activities (range instruction/shooting and/or classroom instruction) of 4-H Shooting Sports Clubs.

- The First Aid Kit must be checked to make sure all items are in working order and to make sure it is re-stocked whenever necessary.

- Eye Protection (except for archery) must be worn by all participants, leaders, and observers whenever live fire is occurring.

- Rifle, pistol, shotgun, and muzzleloader participants, leaders, and observers must use Ear Protection whenever live fire is occurring.

- Archery participants, leader, and observers must wear Ear Protection when the Archery Range is located near a gun range that is conducting live fire.

- Minimization of Lead Exposure: no persons shall eat or drink until washing their hands after being on the range. If water is not available, Shooting Instructors shall provide anti-bacterial towelettes, waterless soap, or similar product for the wiping of hands once the shooting has concluded.

I have read the above safety guidelines and understand that these guidelines (as well as other safety guidelines) must be strictly followed at all times. I also agree to remind the other instructors (listed on Page 2 of this form) of these safety guidelines.

________________________________________________________________________

Signature of Key Leader                                                               Date
The use of a safe Shooting Range is a vital part of the 4-H Shooting Sports Program. The Shooting Range used by the 4-H Club completing this Risk Management Plan is (if two or more Shooting Ranges are used, please duplicate this page as often as necessary):

Name of Range:__________________________________________________________

Address of Range:________________________________________________________

________________________________________________________

Email Address of Range:___________________________________________________

Phone Number of Range:___________________________________________________

It is best (but not required) to obtained written permission to use a Shooting Range. Written permission has been obtained for the use of the Shooting Range listed at the top of this page (please circle appropriate answer):                yes           no

Regardless of written permission being obtained, responsibility for the following items have agreed upon between the Shooting Range (listed at the top of this page) and the 4-H Club completing this Risk Management Plan.

• Drinking Water
• Toilet Facilities and Maintenance
• Garbage Collection and Removal
• Utility Expenses (gas, sewer, electricity, etc)
• Fire Extinguisher(s)
• Telephone/Emergency Communications
• Backup Communications
• Emergency Shut Down Procedures
• Site Evacuation in Emergency Situations

Along with responsibility delegations and permission (written or verbal), a safety inspection of the range will be completed before the 4-H Club meets for the first time each Club Year and throughout the year as needed. Safety procedures and safety items (signage, berms, safety lines, etc) need to be inspected (and fixed if necessary) before utilization by the 4-H Club. Possible hazards (man-made or natural) should also be indentified and eliminated or reduced as much as possible.

I have read the above Shooting Range guidelines and understand that these guidelines (as well as other safety guidelines) must be strictly followed at all times. I also agree to remind/show the other instructors (listed on Page 2 of this form) of these expectations.

________________________________________________________________________
Signature of Key Leader                                                               Date
Weather problems, environmental effects, disaster issues, accidents, and other similar situations can all create unusual situations that cause the mind to run extremely fast and/or cause the mind to go blank and/or cause the mind to not thinking clearly and correctly. Therefore, the purpose of this section is to provide a single page paper that can be completed in a time of calm and rationale thinking and then utilized in the event of an emergency situation. Thus, it is important for all instructors know location of this form.

Ambulance Phone Number:_________________________________________________

Hospital/Urgent Care Center Phone Number:_________________________________

Emergency Room Phone Number:___________________________________________

Poison Control Center Phone Number:_______________________________________

Police/Sheriff Dept Phone Number:________________________________________

Fire Department Phone Number:___________________________________________

Location of Participant’s Health Forms:_____________________________________

Fastest Route to Hospital/Urgent Care Center:_______________________________

_______________________________________________________________________

I have read and completed the above section on Emergency Situations. I also agree to discuss this with the other instructors (listed on Page 2 of this form) of these expectations.

Signature of Key Leader                                                               Date

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************************************************************************

This form has been duly completed (with as much detail and information as possible) and was returned to the County UNCE/4-H Office.

Signature of Key Leader             Phone Number                 Date

************************************************************************
************************************************************************

This form has been reviewed/discussed and accepted by the County UNCE/4-H Personnel of (please state name of county):

Signature of County UNCE/4-H Personnel             Office Phone Number              Date