Completed forms must be submitted annually by November 15th to the local Extension office where you are registered as a volunteer instructor.

{Please be sure to include the number of youth contacts and estimated hours of instruction for each discipline you hold a Level 1 or Level 2 certification in; if none, enter zero. For any disciplines that you are not certified in, please leave those rows blank.}

Individual Instructor Summary 4-H Shooting Sports Annual Demographics Report

County: Instructor: Address: E-mail: Report Year October 1, 20 to September 30, 20 Check here if no teaching contacts to report this year, but wish to stay on the active list of 4-H Shooting Sports instructors.											
Please indicate the	number of youth & ins		structor hours provide Special Interest		ed (by discipline) to your o		county 4-H Shooting Sp		Other Events: [ex. Shooting Sports Trailer Promotions (at Cabela's, Field Days, Jakes, etc.)]		r:
Shooting	Number of 4-H Members	Number of	Number of 4-H Members	Number of	Number of	Number of	Number of	Number of	Number of	Number of	Total 4-H members plus youth
Discipline	Enrolled Annually	Instructor Hours	Enrolled Annually	Instructor Hours	Youth Contacts	Instructor Hours	Youth Contacts	Instructor Hours	Youth Contacts	Instructor Hours	contacts by discipline
Archery			·								
Hunting/Wildlife											
Muzzleloader											
Pistol (air & .22 caliber)											
Rifle (air & .22 caliber)											
Shotgun											
Total	hara annallad	lin 4 U Shoo	ting Sports of	licainlines v	ou lade						
For Office Use Only:	bers enrolled		ung Sports C		ou ied:					_	