

4-H

A

R

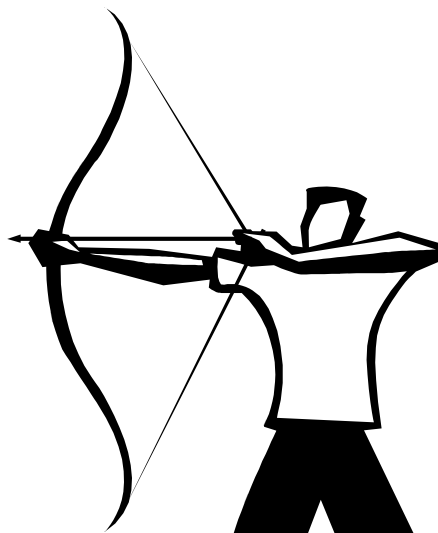
C

H

E

R

Y



# Member Record Book

**Name:** \_\_\_\_\_

**Birth Date:** \_\_\_\_\_

**Club Name:** \_\_\_\_\_

**Record book beginning date:** \_\_\_\_\_

**Record book finish date:** \_\_\_\_\_



# Your Goals and Objectives for the Year

List up to three goals for your 4-H shooting sports project for this year. For each goal, list at least three objectives you need to accomplish to reach those goals, like how/what will you do to reach this goal?

**Goal 1:** \_\_\_\_\_

Objective 1: \_\_\_\_\_

Objective 2: \_\_\_\_\_

Objective 3: \_\_\_\_\_

**Goal 2:** \_\_\_\_\_

Objective 1: \_\_\_\_\_

Objective 2: \_\_\_\_\_

Objective 3: \_\_\_\_\_

**Goal 3:** \_\_\_\_\_

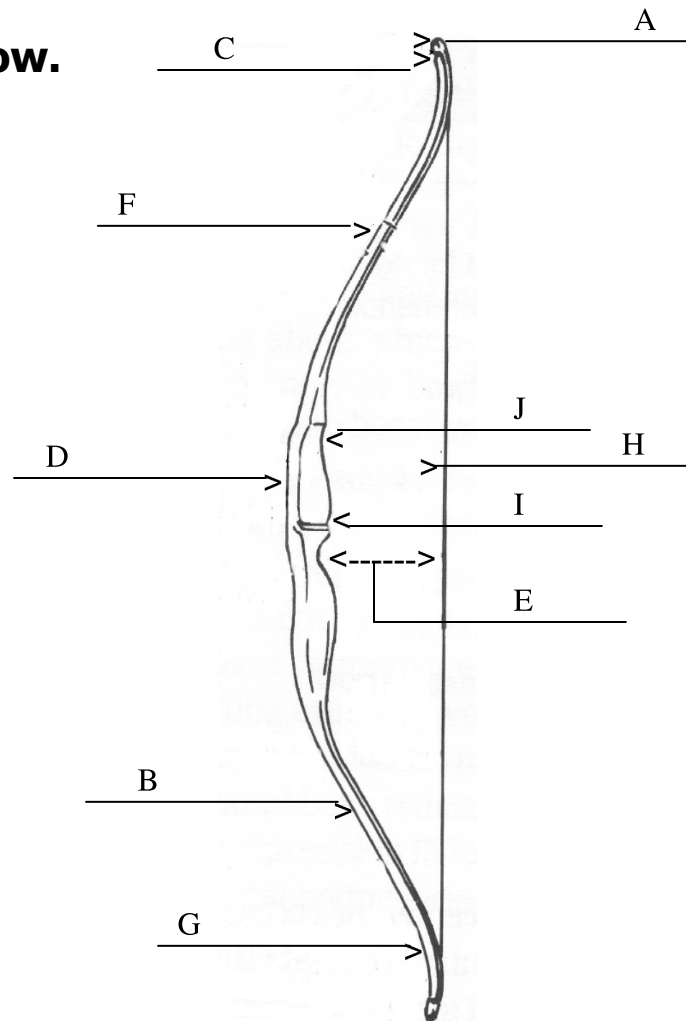
Objective 1: \_\_\_\_\_

Objective 2: \_\_\_\_\_

Objective 3: \_\_\_\_\_

# Parts of a Bow

Match the parts of the bow.



	Arrow Rest
	String
	Grip

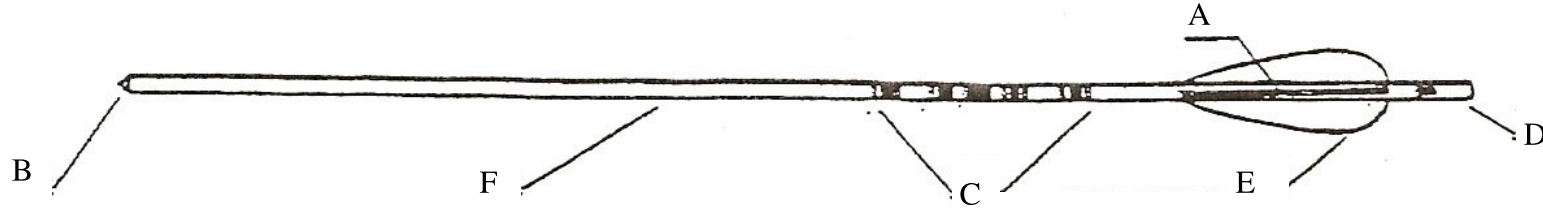
	Lower Limb
	Upper Limb
	Self

	String Notch
	Tip
	String Hieght

	Sight Window
--	--------------

# Parts of an Arrow

Match the parts of the arrow.



	Point
	Shaft
	Nock

	Fletching
	Index Feather (Vane)
	Crest

# Safety Rules

**Ages 9-11 list three rules of archery \* Ages 12-16 list six rules \* Ages 17-19 list ten rules.**

**Rule 1:** \_\_\_\_\_

**Rule 2:** \_\_\_\_\_

**Rule 3:** \_\_\_\_\_

**Rule 4:** \_\_\_\_\_

**Rule 5:** \_\_\_\_\_

**Rule 6:** \_\_\_\_\_

**Rule 7:** \_\_\_\_\_

**Rule 8:** \_\_\_\_\_

**Rule 9:** \_\_\_\_\_

**Rule 10:** \_\_\_\_\_

# Safety Equipment

Answer the following questions.

**Explain the importance of having proper safety equipment.**

---

---

---

---

---

---

---

**List the safety equipment you use for your discipline.**

---

---

---

---

---

---

---

# How to maintain your Bow

**Explain the importance of maintaining your bow.**

---

---

---

---

---

---

---

---

**Explain how to maintain your bow.**

---

---

---

---

---

---

---

---



# Equipment Inventory

Add additional pages if needed

<b>Item</b>	<b>Date Purchased Or Acquired</b>	<b>Purchase Cost</b>	<b>Serial Number</b>

Do the following  
pages that correspond  
with your  
discipline(s).

Once complete continue to page

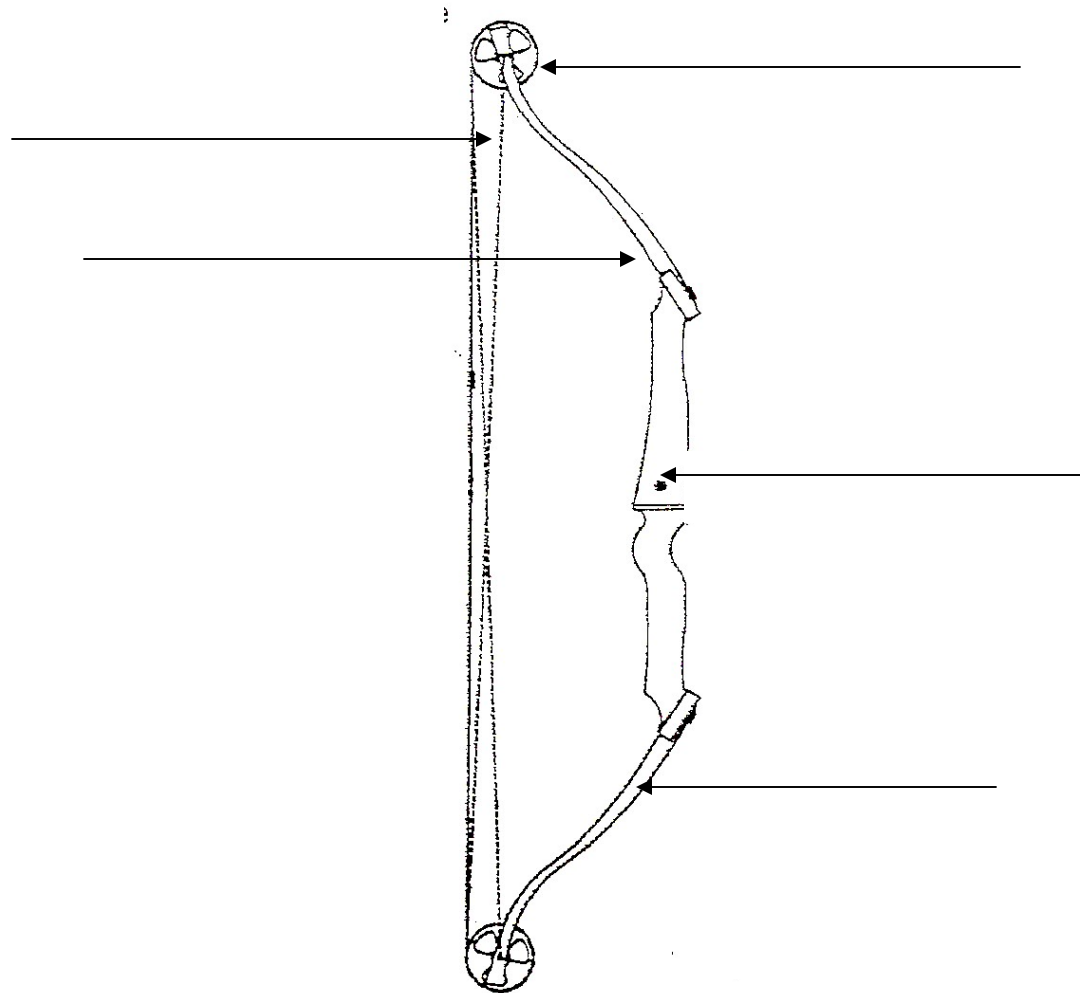
15

# Compound Bow

1) What brand of bow do you have? \_\_\_\_\_

2) Do you shoot with sights? \_\_\_\_\_

3) Label the particular parts of a compound bow.



# Recurve Bow

1) What brand of bow do you have? \_\_\_\_\_

2) Do you shoot with sights? \_\_\_\_\_

3) Explain how to string your bow.

---

---

---

---

---

---

---

---

---

---

---

---

# Open Bow

1) What brand of bow do you have? \_\_\_\_\_

2) What type of sight do you shoot with? \_\_\_\_\_

3) What type of release aid do you use? \_\_\_\_\_

4) What release aid are you not allowed to use? \_\_\_\_\_

5) Do you use any other pieces of equipment? \_\_\_\_\_

6) What other equipment are you allowed to shoot with?

---

---

---

---

---

# 3-D Archery

1) What brand of bow do you have? \_\_\_\_\_

2) Do you shoot with sights? \_\_\_\_\_

3) Where is the kill zone on a deer?

---

---

4) Between what distances do you shoot the target? \_\_\_\_\_

5) What is the maximum draw weight? \_\_\_\_\_

6) What is the maximum stabilizer length? \_\_\_\_\_

# Report

**Select a shooting sports related topic (preferably a safety related topic) and learn more about it. Examples: the development of ear and eye protection, history of a gun type, an important person in the history of guns, or any thing dealing with the hunting. List the sources you used.**

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

# Photographs



# How Did You Do?

<b>Rating Scale</b>	<b>Excellent</b>	<b>Very Well</b>	<b>Ok</b>	<b>Not So Well</b>	<b>Poorly</b>
	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>

**Goal 1:** \_\_\_\_\_

**Rate:** \_\_\_\_\_ **Explanation:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Goal 1:** \_\_\_\_\_

**Rate:** \_\_\_\_\_ **Explanation:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Goal 1:** \_\_\_\_\_

**Rate:** \_\_\_\_\_ **Explanation:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# Project Review

Have one or two of your shooting sports leaders fill out this page.

Discipline: \_\_\_\_\_

Discipline: \_\_\_\_\_

Comments:

---

---

---

---

---

---

---

---

---

---

---

---

---

---

Comments:

---

---

---

---

---

---

---

---

---

---

---

---

---

---

Reviewer's Signature and Date:

Reviewer's Signature and Date:

# Practice Records

Add additional pages if needed

Date	Description of practice	Comments/Observations

# Competitive Events

<b>Date</b>	<b>Competitive Event</b>	<b>Possible Score</b>	<b>Your Score</b>