☐ TRAP ☐ BB ☐ AIR PELLET ☐ RIFLE ☐ MUZZLELOADER ☐ ARCHERY

ISABELLA COUNTY 4-H SHOOTING SPORTS

PROJECT RECORD

Name:_____ Year:_____

Club:_____ Age:_____

Things I learned or accomplished this year:_____

_____

_____

_____

_____

SHOOTING PRACTICE RECORD:

Date	Location & Type of Shooting	Comments/Score
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

FINANCIAL RECORD:

Date	Item Purchased	Cost
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

TOTAL SPENT THIS YEAR _____

LEADERSHIP EXPERIENCES:

Date	Activity Performed (including # of participants)
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Things I would like to learn or accomplish next year:_____

_____

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