

Macomb County 4-H Outdoorama



Extension



Hiking

Orienteering

Saturday, May 30th 10 a.m. – 3 p.m.

Camp Rotary 20505 29 Mile, Ray Twp. Lunch provided Register by May 20th Contact the 4-H staff at 586-469-6431 or email macomb.4h@macombgov.org



Fire starting



Shooting Sports

Plant & Track I.D.



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Fun for kids and adults. Learn what 4-H has to offer in the outdoors!







Macomb County 4-H Outdoorama Registration

Macomb County 4-H Outdoorama
Camp Rotary, 20505 29 Mile Rd., Ray Twp.
\$5 per participant.

Pre-registration is required.

Saturday, May 30, 2015
Registration begins at 9:30 a.m.
Event is from 10 a.m. – 3 p.m.
Lunch is provided.

1. Registration form and payment due no later than Wednesday, May 20, 2015 to:

MSU Extension Office Attn: 4-H Outdoorama

21885 Dunham Road, Suite 12 Clinton Township, MI 48036

- 2. Make check payable to: "Macomb County 4-H Outdoor Ed. & Rec. Committee."
- 3. This event is open to youth, ages 10-19, and 4-H leaders, parents, and volunteers.
- 4. Cost is \$5 per participant (youth or adult).
- 5. Dress for the weather. This is an all-day, outdoor event!

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Macomb County 4-H Outdoorama Registration Form

Name:	□ Youth, age
	□ Adult
If youth, parent name:	
Street:	
	Phone number:
Email address:	
4-H club:	County:
Check one: ☐ A signed MI 4-H Shooting Sports Parenta my county 4-H office.	l Permission & Acknowledgement of Risk Form is on file with
☐ A signed MI 4-H Shooting Sports Parenta	I Permission & Acknowledgement of Risk Form is enclosed.



MICHIGAN 4-H SHOOTING SPORTS

Parental Permission and Acknowledgement of Risk

i/we, the parent(s) (legal guardian) of	grant permission	
for his/her participation in the Michigan 4-H Shootin	g Sports program. I/We approve the use of	
firearms, live ammunition, and/or archery equipmen		
of a 4-H certified shooting sports leader. I/We under		
hazardous activities and entail the risk of serious inju	, ,	
shot or archery wounds and can result in paralysis, lo		
participation in this activity is entirely voluntary. I/W leaders, County 4-H Extension Council/Committee, S		
Extension, or Michigan State University, liable for an		
this activity, except insofar as an injury is proximately	, , ,,	
	. , , , , , , , , , , , , , , , , , , ,	
I/We realize that our child will be dismissed from the	•	
instructions and safety guidelines. I/we also understand that I/we will be asked to pick up my		
child immediately if he/she is dismissed from an active	vity/event.	
I/We acknowledge and accept responsibility to sit do	own with my son/daughter and talk through	
the importance of listening to instructions and to bel	having appropriately.	
Parent (Guardian) Signature	Date	
, ,		
Parent (Guardian) Signature	Date	
	54.0	