

**TO:** Wingshooting Clinic Registrants

**SUBJECT:** Shabbona Lake SRA Introductory Wingshooting Clinic

To register for the Shabbona Lake State Recreation Area Introductory Wingshooting Clinic on **Saturday**, **August 5,2023**, or **Sunday**, **August 6, 2023**, complete the attached Skill Level Assessment form, and, if applicable, also complete the attached permission form. The permission form must be signed by a parent or guardian for any participant under 18 years of age. There is a \$10.00 registration fee per participant for the clinic, as the registration fee is used to help with the cost of the clinic.

A fact sheet with information that you will need to review is also attached. Please send the completed Skill Level Assessment form and a check in the amount of \$10.00 payable to: **Illinois Conservation Foundation**; and if applicable, the signed permission form to the address below. The completed form(s) and payment should be sent as early as possible, but must be received not later than Wednesday, August 2<sup>nd</sup>. Your registration will be confirmed after your forms and payment are received. Please mail your forms and check to:

IDNR - Wingshooting ATTN: Sheldon Fairfield One Natural Resources Way Springfield, IL 62702

Please be on time for the clinic. We will start promptly at 10:00 a.m. so you will need to be at the Shabbona Lake State Recreation Area between 9:30-10:00 a.m. to check-in. Lunch will be provided, but please bring your own drinks to stay hydrated for the entire event.

If for any reason you are unable to attend, call us at least 72 hrs. in advance as we typically have a waiting list. We will be able to accommodate someone else if you let us know you will be unable to attend.

If you have any questions or require additional information, please contact me by email at <a href="mailto:sheldon.fairfield@illinois.gov">sheldon.fairfield@illinois.gov</a>, or by phone at 217/524-5466.

Sincerely,

Sheldon Fairfield

Sheldon Fairfield IDNR Wingshooting Program

## **Shabbona Lake State Recreation Area Introductory Wingshooting Clinic**

| I am the parent/guardia  | ·  | , and I give permission for my shooting abbona Lake State Recreation Area on:   |
|--|--|---|
| student to participate in  | Title wingshooting clinic at the <b>Sha</b>  | bbolla Lake State Recleation Alea on.   |
| Please Check One:  | □Saturday, August 05, 2023   | □Sunday, August 06, 2023  |
| my shooting student to<br>this Parental Permission<br>including behavioral dis | participate in this activity. Safety is<br>Form, please list (print) any chron<br>orders, attention deficit/hyperactiv | ns at clay targets, and I hereby specifically give permission for s very important to all of us. In the space provided below on the ic medical conditions your son or daughter currently has evity disorder, seizure disorder, diabetes or others. If your son N/A. This information will be kept confidential by the |
| <del>-</del>   | cion such as those listed above does<br>cal condition is well controlled.  | s not necessarily disqualify an individual from participating   |
| Medical Conditions:  |  |   |
|  |  |   |
|  |  |   |
|  |  |   |
| •  | of Natural Resources, the Safety Ed<br>e Wingshooting Clinic for disruptive  | lucation Instructor, or the Wingshooting Instructor will remove or unsafe behavior.   |
| Parent's Signature:  |  |   |
| Parent's Name (Please F  | Print):  |   |
| Date:  |  |   |
| Street Address:  |  |   |
| City, State, Zip:  |  |   |
| Telephone Number(s) (I   | nclude Area Code):   |   |
| Residence:   |  |   |
| Cell:  |  |   |
| E-mail Address:  |  |   |

## Wingshooting Clinic Skill Level Assessment Shabbona Lake SRA

| Please Check One: □Saturday, August 5, 2023 □Sunday, August 6, 2023  |
|--|
| Name (print legibly)   |
| Street Address   |
| City, State, Zip   |
| County   |
| Email Address  |
| Age Height(ft)(in) Weight (youth)  |
| How did you find out about this clinic?  |
| I have shot at clay targets (CHECK ONE)  ☐ Never (less than 1 box of shells) ☐ Rarely (less than 20 boxes of shells) ☐ Occasionally (more than 20 boxes of shells) ☐ Often (more than 100 boxes of shells) |
| CHECK ONE of the following:  |
| ☐ I will use an IDNR department owned shotgun (encouraged).  |
| □ I will bring my own shotgun.   |
| *** Please circle one of the following gauges ( 12 ga, 20 ga, 28 ga)   |

Twenty-eight gauge shotguns with shotshells will be provided. Students may bring their own shotgun. If the shotgun has interchangeable chokes, bring the most open choke(s) available (cylinder, skeet or improved cylinder).

\*\*\*The gauges listed above are the only gauges we can accommodate.

## SHABBONA LAKE SRA WINGSHOOTING CLINIC INSTRUCTIONS FOR STUDENTS

## **SPECIAL NOTES:**

- Participants must be 10 years of age or older, and at least 4 feet 6 inches tall and weigh 75 pounds or more to register.
- Introductory Wingshooting Clinics are designed for beginner/novice youth, women and men shotgun shooting students. Participants must legitimately be in either the "Never" or "Rarely" skill level to enroll in these clinics. Prospective participants with shooting skills beyond the novice level should consider registering for a Hunters Wingshooting Clinic.
- The Department of Natural Resources, the Safety Education Instructor, or the Wingshooting Instructor will remove any participant from the Wingshooting Clinic for disruptive or unsafe behavior.
- Wingshooting Clinics do not satisfy the Illinois Hunter Education Requirement.

DATES AND TIMES: Saturday, Aug. 5, 2023, and Sunday, August 6, 2023, 10am - 4pm

**LOCATION:** Shabbona Lake State Recreation Area (DeKalb County)

**DIRECTIONS:** Directions to Shabbona Lake State Park follow:

- Entering Shabbona from the east on Rt. 30, turn left at the BP Gas Station on Indian Road, and then right on to Preserve Road.
- When entering Shabbona from the west on Rt. 30, turn right at the Casey's Gas Station on to South Shabbona Road and then left on Preserve Road.
- The park entrance is on Preserve Road. Follow the signs to the park office where the clinic begins.

**DRINKS/LUNCH:** Please bring your own drinks to stay hydrated for the entire event. Lunch will be provided at no cost to wingshooting students at the site headquarters building.

**APPAREL:** Wear upper garments that do not restrict either side-to-side shoulder movement or up and down arm movement. Upper garments should not have snaps, buckles, buttons, or strap adjustments on the front side of the shooting shoulder. **A cap or hat is required.** 

**FOOTWEAR:** This is a field activity. Wear comfortable but sturdy shoes orboots. No open-toed shoes or sandals.

**EYE & EAR PROTECTION:** Eye and ear protection are mandatory and will be provided. Students with their own shooting glasses and ear plugs or earmuffs are encouraged to bring them. Students who wear prescription glasses or contact lenses should wear them.

**SHOTGUNS:** Twenty-eight gauge shotguns with shotshells will be provided. Students with their own shotgun are encouraged to bring the shotgun. If the shotgun has interchangeable chokes, bring the most open choke available (cylinder, skeet, or improved cylinder). **Note: Since shotshells will be provided, students bringing a shotgun must note this on their skill assessment sheet or let me know by phone at 217/524/5466 prior to Wednesday, August 2<sup>nd</sup>.** 

**INSTRUCTORS:** The shotgun safety class will be instructed by an Illinois Department of Natural Resources (IDNR), Volunteer Hunter Safety Instructor or National Sporting Clays Association (NSCA) and IDNR Certified Wingshooting Instructor(s). Wingshooting instruction in the field will be given by NSCA and IDNR Certified Wingshooting Instructors.

**SPONSORS:** This Wingshooting Clinic is sponsored by Pheasants Forever – DeKalb County & LaSalle County Chapters, the Shabbona & Sycamore Sportsmen's Clubs, the Illinois Conservation Foundation, and the Illinois Department of Natural Resources. By providing funding and support, these organizations are demonstrating their strong commitment to the shooting sports and firearm safety, to family oriented outdoor recreation and to effective public agency/private sector partnerships.