## RYLA 2017 JUNE 25 – JUNE 28 CAMP HINDS RAYMOND

# sTUDENT REGISTRATION & pARENT cONSENT FORM

|  |
| --- |
| (Please Print or Type ) |
| Today’s date: | Rotary Club Contact Person: |
| sTUDENT INFORMATION |
| STUDENT Last name:  | First: | Middle: |  |  | Student Name for Name Badge |
|  |  |
| Will you take need to take medication during camp? | RYLA medical forms due by June 1st. | Birth date: | Age: | Sex: |
| ❑ Yes | ❑ No |  |  / / |  | ❑ M | ❑ F |
| Mailing Address Street address: | Student Email Address | Student phone no.: |
|  |  | ( ) |
| P.O. box: | City: | State: | ZIP Code: |
|  |  |  |  |
| Name of High School | Name of Rotary Club that issued you the Scholarship | Name of HS Contact if Applicable |
|  |  |  |
| Diet Restrictions |
| ❑ None | ❑ Vegan | ❑ Vegetarian | ❑ Nut/Peanut Allergy | ❑ Lactose | ❑ Other |
| **Student Signature:** | By signing you are applying for RYLA 2017 and are able to attend Camp June 25th to June 28th and you acknowledge you are receiving a full scholarship to camp. |
| **Date Signed**:  |
| Parent / Guardian INFORMATION |
|  |
| Parents/ Guardian Names | Email Address | Address (if different): | Phone Number |
|  |   |  | ( ) |
|  |  |  | ( ) |
|  |  |  | ( ) |
| Is this student covered by insurance? | ❑ Yes | ❑ No | Medical Forms and consent forms will be sent to the student and parent Emails. |
| Final BBQ Tickets | On Wednesday June 28th there is a final BBQ and ceremony that begins approximately at 5:00 ends at 6:00 to 6:30 your student can give you a tour of the camp. Tickets for the BBQ are $12.00 or $20.00 for two or $30.00 for three, ect. (Student is covered by the scholarship) |
| Drop Off – Sunday June 25th | Students arrive at 8:30 for drop off. We have a full system of registration that will allow for all 144 students to register and begin camp within one hour.  |
| Welcome Package | Once the RYLA staff is forwarded this application from the local Rotary Club, you will receive a welcome package that includes medical forms, photo release forms, BBQ ticket instructions, and the full rules of camp including a packing list and what to bring. You can view this at http://rotary7780.org/sitepage/ryla/ |
| IN CASE OF EMERGENCY (we contact parents / Guardians first) |
| Name of local friend or relative (not living at same address): | Relationship to Student | Home phone no.: | Work phone no.: |
|  |  | ( ) | ( ) |
| **I acknowledge the above named student has accepted a Scholarship to Rotary Youth Leadership Camp and will attend starting June 25th at 8:30 am thru Wednesday June 28th ending with a family BBQ starting approximately at 5:00 PM.**  |
|  | **Patient/Guardian signature** |  | **Date** |  |
|  | **Patient/Guardian signature** |  | **Date** |  |