**STUDENT INFORMATION**

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| --- | --- | --- |
| Today’s Date: | Rotary Club Contact Person: |  |
| 1a. Student’s Last Name: | 1b. First Name: | 1c. Middle Initial: |
| 2. Nickname for Badge: | 3. Birth Date: | Age: |
| 4. Student’s Email: | 5. Student’s Phone Number: | 6. Student’s Sex: |
|  |  | * Male * Female |
| 7a. Student’s Physical Address: | 7b. Student’s PO Box (if applicable) |  |
|  |  |  |
| 7c. City | 7d. State | 7e. Zip Code |
|  |  |  |
| 8. Student’s High School: | 9. Name of Guidance Counselor: | Sponsoring Rotary Club: |
|  |  |  |
| 10. Guidance Counselor’s Email Address: | 11. Guidance Counselor’s Phone Number: |  |
|  |  |  |
| 12. Student’s Dietary Restrictions |  |  |
| 🗠 None 🗠 Vegan 🗠 Vegetarian | 🗠 Nut/Peanut Allergy 🗠 Lactose | 🗠 Other |
| **Please read the following statements, mark that they have been read, and sign at the end.** |  |  |
| MEDICAL FORM | I acknowledge that I must fill out a medical form which I will receive in a welcome package in the upcoming weeks. This form will include any medication and.or allergies I may have and will also require completion by my primary care physician and need to be completed and mailed to RYLA by June 1st. | 🗠 I understand  🗠 I do not understand |
| SCHOLARSHIP: | I acknowledge that by signing I am applying for RYLA 2020 and I am able to attend 4 full days - June 28th to July 1st and I acknowledge that I am receiving a full scholarship valued at $750 to attend camp. | 🗠 I understand  🗠 I do not understand |
| **Student Signature:** |  | Date Signed: |

**PARENT/GUARDIAN INFORMATION**

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| --- | --- | --- |
| 13a. Parent/Guardian #1 Last Name: | 13b. First Name: |  |
| 13c. Parent/Guardian #1 Email: | 13d. Parent/Guardian #1 Phone Number: |  |
|  |  |  |
| 13e.Parent/Guardian #1 Physical Address (if different) | 13f. PO Box (if applicable) |  |
|  |  |  |
| 13g. City | 13h. State | 13i. Zip Code |
|  |  |  |
| 14a. Parent/Guardian #2 Last Name: | 14b. First Name: |  |
|  |  |  |
| 14c. Parent/Guardian #2 Email: | 14d. Parent/Guardian #2 Phone Number: |  |
|  |  |  |
| 14e.Parent/Guardian #2 Physical Address (if different) | 14f. PO Box (if applicable) |  |
|  |  |  |
| 14g. City | 14h. State | 14i. Zip Code |
|  |  |  |
| **EMERGENCY CONTACT (we contact parents first)** |  |  |
| 15. Name of Local Friend/Relative (different address) | 16. Cell Phone Number: | 17.Relationship to student |
|  |  |  |
| **Please read the following statements, mark that they have been read, and sign at the end.** |  |  |
| FINAL BBQ | On Wednesday, July 1st there is a final BBQ and ceremony that begins approximately at 5:15 pm ends at 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, etc. (Student is covered by the scholarship) | 🗠 I understand  🗠 I do not understand |
| STUDENT DROP OFF - SUNDAY, JULY 28 | 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. | 🗠 I understand  🗠 I do not understand |
| SCHOLARSHIP | I acknowledge the above-named student has applied for and will accept if granted a Scholarship valued at ($750) to Rotary Youth Leadership Camp (RYLA) and will attend starting June 28th at 8:30 am thru Wednesday June 1st ending with a family BBQ starting approximately at 5:15 PM. | 🗠 I understand  🗠 I do not understand |
| **Parent/Guardian #1 Signature:** |  | Date Signed: |
| **Parent/Guardian #2 Signature:** |  | Date Signed: |

Students:

1. Please fill out the above application and registration form. Have your parent/guardian sign the form. Print neatly or better yet fill out on your computer and print off the form for signatures.

2. You are applying to attend RYLA and to receive a scholarship valued at $750.00 to attend.

3. Submit the application along with an essay or staff recommendation letter.

a. Essay: What leadership strengths do you have and what would be your goals for attending a 4-day outdoor leadership camp.

b. Recommendation: Have a teacher or guidance counselor provide a recommendation letter with an emphasis on your leadership skills.

4. Submit the package to your local Rotary Club. Address for clubs can be found<http://rotary7780.org/clubdirectory>.

a. The guidance counselor or Interact Advisor will know the address as well.

b. Note you do not have to be in Interact to be eligible for the scholarship.

5. You may have an interview with your local Rotary Club

6. You will receive an email notification and the welcome package which will include medical forms that need to be completed by June 1st.

Parents:

1. Your student is applying to receive a Scholarship to RYLA a 4 Day outdoor leadership camp that is held at Camp Hinds in Raymond Maine.

2. Your student will receive a scholarship to attend and the fee is paid for by your local Rotary Club. If your student does not attend the cost is still paid.

3. Medical Forms that require a Doctor’s Signature would be due by June 1st so please plan accordingly once your child is accepted to the program. You will receive an email notification.