

ROTARY YOUTH PROGRAM FOR ENRICHMENT

Participant Application Form

Upon completion of this form, please scan and email this application to RYPEN5370@gmail.com

You will receive a confirmation email from us after the completion of the form. Should you have any questions, do not hesitate to email RYPEN5370@gmail.com

What is RYPEN?

RYPEN is a 4-day camp for full-time students between the ages of 14 and 18. The objective of the camp is to encourage personal growth and to bring about a happy and productive youth who is a positive role model in their community and to their peers. It is hosted by the RYPEN Committee in partnership with local Rotary Clubs across Rotary International District 5370.

This year, it will be held from May 7th to May 10th, 2020 at Birch Bay Ranch in Sherwood Park, AB.

What Can You Expect from RYPEN?

Participants are involved in a variety of workshops and activities that provide an opportunity for personal development, gaining self confidence, communication skills, attaining an understanding of how to set and achieve goals, challenging their personal boundaries, taking control of their own future, building friendships, and developing life skills.

Interested?

Apply to be a RYPEN participant by filling out and submitting the form before the deadline. Due to a limited number of spots, applications will be filtered and first-time applications will be given priority. Deadline: 11:59PM on April 17th, 2020.

The cost of RYPEN is \$525 + GST.

Upon submission, the Committee will review your application and reach a decision regarding attending RYPEN. We will be in contact with you within a week of the form submission. It is critical that you check your email frequently around this date because further waivers and essential information will be sent and are time-sensitive to ensure that participant needs are accurately met during the event.



ROTARY YOUTH PROGRAM FOR ENRICHMENT PARTICIPANT INFORMATION

Name:							
Sex:	First —————			Last Nick Birth Date:		name (optional)	
Address:	Ctorest A J.J.					TT-21 "	
	Street Addres	SS				Unit #	
School:	City		Province			Postal Code	
Email:			Phone #	#:			
Shirt Size:	XS□	S□	М 🗆	L□	XL 🗆	XXL□	
Medical Conditions:	Yes □	l No□	Healtho	eard #:			
Please check any that app If any check	ply:	physical dis hip, knee, a eye, ear, and asthma diabetes serious pho learning cor	italization act with comn abilities/limit nkle, shoulded d throat probl	tations r, arm, or ba ems	ack injury		
please elabo	•						
Dietary Restrictions	Yes □	l No□	If yes, p elabora				
Allergies:	Yes □	l No□	If yes, p elabora				



ROTARY YOUTH PROGRAM FOR ENRICHMENT PARENT/GUARDIAN INFORMATION

Name:				
	First	Last		
Address:				
	Street Address		Unit #	
	City	Province	Postal	Code
Email:		Phone #:		
Relationsl	hip:			
If yourequest to 1st, 2019. please info	your local Rotar In addition, if you	n ot have sponsorship but have the means ry Club, please submit said request no la u do not have the means to contact your see no later than April 1st so we may assi	ter than Ap local club,	
Do you re	quire transportat	ion from Edmonton to Sherwood Park?	Yes □ N	o 🗆
Do you cu	rrently have spon	nsorship from your local Rotary Club?		
	-	n notified by my school or Rotary Club ssistance in finding sponsorship		
If you che	cked yes, please s	specify the name of your Rotary Club:		

Thank you for your application. If you have any questions or concerns, please contact the committee at RYPEN5370@gmail.com. We look forward to meeting you at RYPEN 2020.



ROTARY YOUTH PROGRAM FOR ENRICHMENT

Consent of Parent/Guardian and Acknowledgement of Release

Upon receiving this waiver, please complete and send a signed copy to the committee via email at RYPEN5370@gmail.com, and be prepared to bring a physical copy on the first day of camp.

Please read the contents of this Consent and Acknowledgement of Risk. If clarification is need, please bring question or concerns to the program chair BEFORE signing. This from just be completed prior to your child attending the 2020 RYPEN camp.

Committee Responsibilities

The committee will make every reasonable effort to ensure or ascertain that:

- The staff, volunteers, and/ore service involved are suitably trained and qualified
- The participants are adequately supervised over all aspects of the program
- The locations used are appropriated for the activities and the group.
- Organization equipment used has been inspected and deemed appropriate and safe
- A safety plan is in place to identify and manage known potential risks
- An emergency plan is in place to deal with an injury or illness to any of the participants

Known Potential Risks

Known potential risks include but are not limited to:

- Injuries related to vehicle crashes en route to and from the activities area
- Becoming lost or separated from the group or the group becoming split up
- Injuries related to slips, trips, and/or falls
- Injuries related to colliding with another person or with a fixed object
- Injuries related to the physical demands of the activity and/or the lack of activity skill
- Other injuries (i.e. blisters, sprains, strains, and acute or overuse injuries/conditions)
- Eye damage resulting from equipment (ie. poles, tree branches, snow reflection, or cold and/or wind
- Weather changes creating adverse conditions (ie. extreme temperatures, storms)
- hypothermia, frostbite or other cold injuries due to insufficient clothing, hydration, or care
- · Loss of hand dexterity in cold or wet weather
- Hyperthermia (overheating) due to overdressing, overexertion, and/or poor hydration
- Equipment related injuries (i.e. due to poor fit, improper adjustment, improper use, and/or malfunction of equipment, and/or entanglement in equipment)
- Illness related to poor personal hygiene, or failure to purify drinking water
- Injuries related to encounters with animals in the environment
- · Allergic reactions to natural substances in the environment or food items
- Psychological injury due to anxiety or embarrassment (i.e. lack of skill, body image)
- Complications of an injury or illness due to remoteness and time to emergency services
- Other risks normally associated with participation in the activity and environment

Rotary RYPEN 5370

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Consent of Acknowledgement of Risk

- I accept the busing transportation for the 2020 RYPEN camp
- I acknowledge my right to obtain as much information as I require about the program or activity and associated risks and hazards, including information beyond that provided to me by the organization
- I freely and voluntarily assume the risks/hazards inherent in the program/activity and understand that my child may suffer personal, potentially serious injury or death arising from his or her participation
- I acknowledge that the Activity Leader has the right to refuse to allow my child to participate in any activity if, in the Activity Leader's opinion, the participant is not adequately fit and equipped or otherwise ready to participate safely
- My child has been informed that he or she is to abide by the rules and regulations, including directions and instructions, from the organization and/or service providers, administrations, instructor, and supervisors over all phases of the program/activity
- In the event that my child fails to abide by these rules and regulations, disciplinary action may require his or her exclusion from further participation, or that I be contacted to have him or her picked up, unless I have specified other transport arrangements. I will be responsible for any related costs associated
- I acknowledge that it is my duty to advise the RYPEN committee of any medical/ health concerns (i.e. medical, physical, emotional, learning, and/or behavioural issues) that may affect my child's ability to participate
- I acknowledge that the committee may choose to cancel the RYPEN camp I the
 conditions are deemed unsafe (i.e. weather, health advisory). I accept that the
 committee will not be liable for any costs associate with such cancellation
- I acknowledge that the program/activity/event supervisors may secure transport to emergency medical services as they deem necessary from my child's immediate health and safety, and that I will be financially responsible for such services

In exchange for being permitted to participate in the activities, the participant and the parents or guardians of the participant, for themselves, their heirs, guardians and legal representatives, release and hereby agree not to make or bring action of any against Rotary, its officers, directors, employees, agents, contractors, representatives, volunteers, sponsors, cooperating organization, and other parties in interest for any injury or damage to the participant or any of the property of the participant, arising out of the attendance and participation in the RYPEN camp and the involvement of the participant in the actives associated with the camp, except for such injury and damage arising from the gross negligence of Rotary or those others set out therein. This shall also constitute permission to use photographs in Rotary literature, social media, and other promotional uses.



DATED: the

day of

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We agree that if anyone makes claims resulting from any injury to the participant (including death) or for any damage to the participant's property, the undersigned will keep Rotary and all those release by this agreement free of and indemnified from any damages or costs incurred as a result of those claims.

As the parent or guardian of any participant who is a minor, we hereby acknowledge the waivers and releases contained in this agreement and hereby agree to indemnify and save harmless the Rotary Club, the Rotary District, its successors and signs and any officers, directors, employees, agents, contractors, representatives, volunteers, sponsors, and cooperated organizations or any other parties connected with the trip and activities associated therewith in respect of any injures (including death) or damage to any property of the participant named herein or any injury or damage to property caused by such participation.

These statements and releases are binding upon us, our heirs, executors, administrators, and assigns.

DATED: tile day of, 2020		
Name of PARTICIPANT (please print)	Signature	
Name of PARTICIPANT'S PARENT or LEGAL GUARDIAN (please print)	Signature	
Address		
Phone #	Email	
Name of WITNESS (please print)	Signature	

2020