

**2024 Club Handbook**

# **Camp RYLA**

**a student leadership camp**

**JUNE 17-21, 2024**

**Sponsored by**

**District 5770 Rotary International**



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## KEY PLAYERS

### Club President should...

- Encourage the Club's participation in Camp RYLA.
- Oversee the Club's overall involvement in the program.

### Club President should ...

- Select a RYLA Chairperson for the club.
- Budget for Camp RYLA participation each year.
- Know and ensure that all RYLA deadlines are met.

### RYLA Chairperson should ...

- Learn about the values and merits of CAMP RYLA.
- Monitor all RYLA deadlines and make sure they are met.
- Inform high school counselors about CAMP RYLA.
- Organize Club camper selection process.
- Ensure that selected campers receive proper notification of their selection and are informed of all camp details.
- **Arrange transportation to and from camp for the selected campers.**
- Use checklist and submit all forms to the Camp Director

## GOALS

### Camp RYLA's goals are three-fold:

- To allow each camper to sharpen their particular strengths through attending talks on leadership, joining group cabin discussions, and participating in camp committees.
- To broaden each camper's understanding and appreciation of others, unique qualities and abilities through participating in a cabin group and experiencing the cabin "bonding" process.
- To assist each camper in developing a comprehensive view of leadership through emphasis on teamwork, motivation, and communication.

### CAMP RYLA DISTRICT CHAIRPERSON:



**BOB USRY**  
Post Office Box 1533  
Norman, OK 73070

(405) 623-3700 (Bob)

[busry@okcoop.org](mailto:busry@okcoop.org)

(405) 623-3702 (Ellen)

[esusry@bobusry.com](mailto:esusry@bobusry.com)

## WHAT IS RYLA?

All RYLA programs encourage youth leaders and provide them with improved techniques of leadership. Their enthusiasm and technique are brought back to the community from which the campers were sponsored, thus impacting the young people being influenced by these youthful leaders.

RYLA introduces a large number of young people and their families to the Rotary ideals of service each year. It helps bridge the communication gap between the generations and helps improve relationships among youth groups, families, and the community.

## RYLA OBJECTIVES

The objectives of a Rotary Youth Leadership Awards program are:

- To further demonstrate Rotary's respect and concerns for youth.
- To encourage and assist selected youth leaders and potential leaders in methods of responsible and effective voluntary youth leadership by providing them with training experience.
- To encourage continued and stronger leadership of youth by youth.
- To publicly recognize the high qualities of many young people who are providing service to their communities as youth leaders.



## THE FOUR-WAY TEST

OF THE THINGS WE THINK, SAY OR DO IN ROTARY:

Is it the **TRUTH**?

Is it **FAIR** to all concerned?

Will it build **GOODWILL** and **BETTER FRIENDSHIPS**?

Will it be **BENEFICIAL** to all concerned?

## **DATES TO REMEMBER**

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### ***January...***

- Clubs should commit to participate by **January 31, 2024**. Send completed Club Participation Form, along with your **club's check** (payable to **Rotary Camp RYLA**) to:

**Bob Usry, Camp RYLA District Chairperson  
Post Office Box 1533  
Norman, OK 73070**

### ***February...***

- **Camp funds (\$450 per camper) should be mailed with the camper application.**
- Contact the high school counselor at your local high school concerning participation in Camp RYLA during the month of February. Supply them with copies of the Camper Application for distribution to interested students. Pick-up camper applications from high school counselors, from the website, or we will be glad to email them to you by **February 28**. Check to ensure that all returned applications are complete (including an attached student photo and parent signature).

### ***March...***

- Review all applications and conduct interviews of applicants, if needed. Make your first selection(s) and choose an alternate(s) in case your first selection(s) cannot attend camp. Contact your selection(s) and send them copies of the Camper Agreement form, medical forms, photo release, and scholarship form provided in this handbook.

### ***April...***

- Send completed application, student **photo (headshot-passport photo)**, camper agreement, medical forms, scholarship form and photo release, with first choice(s) and alternate(s) properly identified, to Camp RYLA District Chairperson by **April 15**.

### ***May...***

- Recruit club members to provide transportation for campers.
- Reconfirm with your selected camper(s) that they still plan to attend the whole week of camp! Again, reiterate their sponsoring club is responsible for the transportation to and from camp. There is no cost to the camper. **This money is paid by the Rotary Club and is not refundable.**
- Publicize camper selection in local media.
- Due to the increased size of the camp, **no camper applications will be accepted by the District after May 15.** Immediately following the May 15 cut-off date, the District Committee will print a camp directory and order camp supplies, t-shirts, and camper plaques.
- **The Camp RYLA District Chairperson must receive all of the following no later than May 16:**
- **Application, Photo Release, Medical Forms, Camper Agreement,**
- Camp RYLA will be held **June 17-June 21, 2024**, at Goddard Youth Camp, Sulphur, OK. Campers should arrive by **11:00 A.M., Monday, June 17**, and should be picked up at **12:00 P.M., Friday, June 21**.

### ***July...***

- Invite your camper(s) to attend your club so they can share their Camp RYLA experiences.

## **CAMP RYLA**

Strong leaders are made, not born. Leadership principles are learned not inherited. Through Camp RYLA, “Leaders of Tomorrow” has a forum through which leadership skills and principles are learned, developed, and enhanced.

Rotary International District 5770 Camp RYLA (which stands for Rotary Youth Leadership Awards) is a five-day leadership training camp which imparts to approximately 60 high school junior leaders (seniors next year) the many facets of leadership through cabin activities, speakers, athletic events, and team building exercises.

This year’s camp will be held at the Goddard Youth Camp, 2964 Goddard Youth Camp Road, Sulphur, OK 73086

## **CABIN GROUPS**

Each camper is assigned to a cabin group consisting of campers, an assistant counselor, and a Rotarian counselor. Campers in each cabin are leaders who represent high schools throughout District 5770. Teamwork, communication, and consensus building are developed as the cabin group faces the week’s challenges together. Each camper has something to contribute. The basis of most memories and experiences comes from participating in the group.

## **RECRUITMENT**

Camp RYLA is a leadership camp that seeks student leaders. They must be high school juniors during the 2023-2024 academic year. These leaders should excel in one or more areas of high school involvement. Other students should respect this candidate for their accomplishments.

Contact the high school counselor at your local high school. Explain to them the type of student that you are seeking, then supply them with copies of the RYLA camper application. Ask that they distribute applications to qualified students. Students should complete the application and return it to the RYLA Chairperson who should review the application to ensure it is complete and includes a student photo (headshot) and parent signature. Clubs should pick up applications from the school and begin reviewing applicants.

Clubs may also wish to distribute applications directly to students who have been recommended by last year’s RYLA campers at the high school, by Rotary Club members, or by church youth ministers.

## **SELECTION**

It is strongly recommended that the Club RYLA committee personally interview each applicant.

Qualifications that should be considered are:

- Commitment to complete the whole week.
- good academic record
- work experiences
- community involvement
- significant achievements
- leadership experience or potential
- positive attitude
- high moral character

A set number of boy and girl campers are accepted. Consequently, the clubs sponsoring more than one camper are asked to select an even number of boy and girl campers.

To avoid “no shows”, select at least one or two students who will serve as “alternate(s)” in the event that your selected camper(s) cannot attend camp. Once you complete these selections, notify both sets of students of their status.

After selection of your campers and alternates, send the original applications (including “alternates”), to the Camp RYLA District Chairperson by **April 15, 2024**. You should keep a copy for your club’s file.

## **COST**

The cost is \$450 per student (non-refundable). Clubs should send their check (payable to Rotary Camp RYLA), along with a completed Camp RYLA Club Participation Form to the Camp RYLA Director by February **20, 2024**.

## **TRANSPORTATION – VERY IMPORTANT**

**Your club is responsible for transporting your selected camper(s) to and from camp. This detail, though in appearance minor, can cause some uneasiness for campers, camp staff and parents if not properly addressed and confirmed. Transporting your camper(s) to and from camp is a great way for Rotarians in your club to get involved in RYLA!**

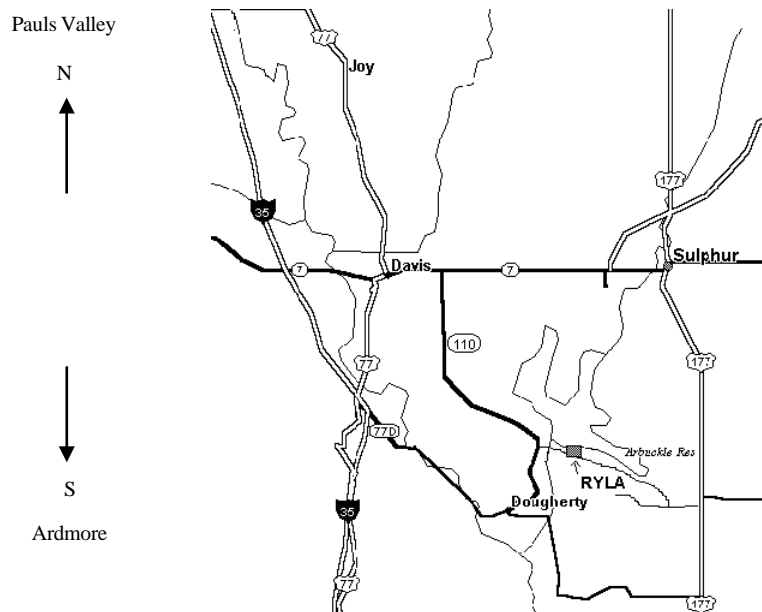
**CAMPERS ARE NOT ALLOWED TO DRIVE THEMSELVES TO CAMP.**

**PLAN ON HAVING YOUR CAMPER(S) AT CAMP BY 11:00 A.M., MONDAY, JUNE 17, 2024, AND PICKING THEM UP AT 12:00 P.M., FRIDAY, JUNE 21, 2024.**

# **GODDARD YOUTH CAMP**

Site of 2024 Camp RYLA

June 17-21, 2024



## **Directions to Goddard Youth Camp:**

**From the north:** take I-35 south to Exit 55, marked “Davis, Duncan, Sulphur”. Go east on Hwy 7 approximately 5 miles to Junction 110 (sign says, “Lifestyles of America” and “Dougherty 10”). Turn right onto Hwy 110 and travel south approximately 7.4 miles to Goddard Youth Camp road (sign says “Lifestyles of America - 1”). Turn left onto Goddard Youth Camp road and travel east approximately 2.6 miles to the Goddard Youth Camp entrance on the left (north) side of the road.

**From the south:** take I-35 north to Exit 51 and follow Highways 77 & 7 northeast to Davis. At Davis, the highways split. Stay on Hwy 7, traveling east to Junction 110. (From this point, follow directions above)

## **ABOUT GODDARD YOUTH CAMP**

Goddard Youth Camp is the site for Camp RYLA and is beautifully situated in the rugged Arbuckle Mountains. The area is known the world over for its unique geology and strange rock formations. The general area is in the overlap of the Deciduous Forests of the East and the Short Grass Prairies of the West and is bountifully supplied with a variety of living plants and animals from both of these natural communities.

The camp, with over a mile of camp shoreline, is located on the 7,000-acre Lake of the Arbuckle’s Recreation Area. Swimming and canoe races have become a Camp RYLA favorite in this beautiful lake setting.

There are three separate cabin areas at Goddard Youth Camp, two of which have been reserved solely for Camp RYLA. Each area has seven cabins, plus a large functional activity building for indoor use. Each cabin accommodates eight people and has single size beds with innerspring mattresses.

- AREA 1 cabins will house the girls. There are two groups of cabins in Area 1, with three cabins in one group and four in the other. Each cabin has its own private bath, and each group of cabins has a central picnic area.
- AREA 3 cabins will house the boys. This area also provides a beautiful, natural setting with seven cabins but has a central bathhouse facility.

A dining hall and outdoor chapel, available for use by all campers at Goddard, is centrally located adjacent to AREA 1.



# Club Participation Form

## Camp RYLA

June 17-21, 2024



\_\_\_\_\_ Rotary Club will sponsor \_\_\_\_ Camper(s) at a cost of \$450 per camper for a total cost (No. of campers X \$450) of \$\_\_\_\_\_.

**Club RYLA Chairperson Information:**

Name \_\_\_\_\_ E-Mail \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Work Phone (\_\_\_\_) \_\_\_\_\_ Home Phone (\_\_\_\_) \_\_\_\_\_

FAX (\_\_\_\_) \_\_\_\_\_ Mobile (\_\_\_\_) \_\_\_\_\_

I hereby agree to select students who embody the leadership qualities as described in the Camp RYLA Club Handbook. Once selected, I will communicate to them all pertinent camp information (including our Club's commitment to transporting them to and from camp) in a timely manner. I understand that all submitted camper applications are subject to review by the RYLA Camp Director. Furthermore, I agree to meet all Camp RYLA deadlines unless special arrangements are made with the Camp RYLA Director or Camp RYLA District Committee Chairperson.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Send this form with your Club's check (payable to Rotary Camp RYLA) to:

**Bob Usry**  
**Camp RYLA District Chairperson**  
**Post Office Box 1533**  
**Norman, OK 73070**

*Space is limited.*

*Check should be attached to the Club Participation Form.*





## CAMP RYLA FORMS CHECKLIST



Club Participation form sent to District on \_\_\_\_\_

Check in the amount of \$ \_\_\_\_\_ for \_\_\_\_ campers (\$450 per camper) sent to District on \_\_\_\_\_

*Date each item as completed (Camper forms are due at District on April 15, 2024)*

***(NO APPLICATIONS ACCEPTED AFTER MAY 15)***

Forms and Materials	Camper _____		Camper _____		Camper _____	
	Received by Club	Sent to District	Received by Club	Sent to District	Received by Club	Sent to District
Application						
Student Photo (HEADSHOT)						
Camper Agreement						
Waiver and Medical Authorization						
Health Certificate/Parent's Evaluation						
College Scholarship Application						
Photo Release						

*comments:*

Forms and Materials	Alternate _____		Alternate _____	
	Received by Club	Sent to District	Received by Club	Sent to District
Application				
Student Photo				
Camper Agreement				
Waiver and Medical Authorization				
Health Certificate/Parent's Evaluation				
College Scholarship Application				
Photo Release				

*comments:*



**CAMP RYLA 2024  
CAMPER APPLICATION  
Rotary Youth Leadership Awards**



District 5770  
Bob Usry, PO Box 1533  
Norman, OK < 73070

**Summer Camp  
June 17-21, 2024,  
Goddard Youth Camp**

Rotary Club _____ RYLA Chairperson _____ RYLA Chairperson Phone (____) _____ <p align="center"><i>Rotary Club Please Complete</i></p>
--

**DO NOT TAPE  
OR STAPLE  
PHOTO TO  
APPLICATION**

**HEADSHOT OR  
PASSPORT  
PICTURE  
REQUIRED**

**PLEASE TYPE OR PRINT CLEARLY**

Full Name: \_\_\_\_\_ Current Age: \_\_\_\_\_ Current Grade: \_\_\_\_\_ Male  Female

Name (you wish on award): \_\_\_\_\_ Name (for name badge): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ T-Shirt Size \_\_\_\_\_

Cell Phone: (\_\_\_\_) \_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Parents: Father: \_\_\_\_\_ Mother: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Cell Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Secondary Phone (\_\_\_\_) \_\_\_\_\_ Secondary Phone: (\_\_\_\_) \_\_\_\_\_

**Are you a certified lifeguard? Yes  No  If Yes, what agency? \_\_\_\_\_**

**EDUCATION: Cumulative Grade Point Average: \_\_\_\_\_ Name of School \_\_\_\_\_**

• **Have any siblings attended RYLA Camp? Yes  No  If Yes, Name(s) \_\_\_\_\_**

• **Are either (or both) of your parents a Rotary Club member or have they been a member? Yes  No**

• **If Yes, Name and Club(s) \_\_\_\_\_**

• **Are you a member of Interact? Yes  No**

**APPLICANT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_**

**I agree to allow the camp Nurse to dispense any non-prescription medication (aspirin, Tylenol, cough syrup, etc.) to my child, if needed. IN CASE OF MEDICAL EMERGENCY, I understand every effort will be made to contact me. In the event, however, that I cannot be contacted, I hereby give permission to the physician selected by the Camp RYLA Director to hospitalize, secure proper treatment for, and to order injection, anesthesia, or surgery for my child, as named above.**

**PARENT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_**

ACADEMIC ACCOMPLISHMENTS: (Positions held and responsibilities undertaken)

HIGH SCHOOL SPORTS PARTICIPATION: (Number of years, levels of competition and any honors)

EXTRACURRICULAR INTERESTS, HOBBIES AND RECREATION:

WORK EXPERIENCE: (Summers/After School)

**YOU MAY USE A SEPARATE SHEET TO PROVIDE THIS INFORMATION – IF IT IS HANDWRITTEN, PLEASE USE BLACK INK IN CASE COPIES ARE MADE OF THE INFORMATION**



# CAMPER AND PARENT AGREEMENT

## Camp RYLA June 17-21, 2024



I understand that the Rotary Club of \_\_\_\_\_ *HAS PAID \$450.00* on my behalf to attend Camp RYLA. It is my intention to attend the Camp from June 17 to June 21, 2024. **I PLEDGE NOT TO ENTER INTO ANY OTHER COMMITMENTS THIS SUMMER THAT WILL CONFLICT WITH THESE DATES. I KNOW THAT I WILL NOT BE ELIGIBLE FOR A SCHOLARSHIP OR ANY AWARDS IF I DO NOT COMPLETE THE WHOLE WEEK.** If an emergency arises that will affect my ability to attend Camp RYLA, I agree to contact the Rotary Club and the Camp Director immediately **– I KNOW THAT THE ROTARY CLUB WILL LOSE \$450 IF THEY ARE NOT ABLE TO FIND A REPLACEMENT.**

Further, while at camp, I agree to abide by the Camp Rules as listed below.

\_\_\_\_\_ Date  
Camper's Signature

\_\_\_\_\_ Date  
Parent's Signature

<b>CAMP RULES</b>
-------------------

- |  |
|--|
| <ol style="list-style-type: none"> <li>1. Phone calls will be limited to home, emergency only. <b>Cell phones must remain in cabin and only be used for communication during free time.</b></li> <li>2. All campers will remain in cabins from 9:45 p.m. until 7:00 a.m.</li> <li>3. <b>No vehicles allowed. Camper transportation must be provided by local Rotary Club.</b></li> <li>4. All campers will be punctual to all scheduled events. <b>Participation is a must.</b></li> <li>5. No tobacco products, drugs, or alcohol allowed on camp premises.</li> <li>6. All campers are to respect counselors, speakers, and fellow campers in the spirit of leadership and cooperation.</li> <li>7. Swimming allowed at scheduled time only while lifeguard is on duty.</li> <li>8. Appropriate dress required at all times. Flip flop or open toed sandals may only be worn inside cabin.</li> <li>9. Campers will remain at camping area for duration of the camp.</li> <li>10. Cabins must be kept neat and clean.</li> <li>11. No boys in girl's cabins or girls in boy's cabins at any time.</li> <li>12. Camp T-shirt to be worn only on Thursday evening, Friday morning, and during School of the Deaf visit.</li> <li>13. Visitors and guests will only be allowed Thursday evening during the presentation session.</li> <li>14. The Camp Director has the discretion to terminate a camper's stay at camp should the need arise.</li> </ol> |
|--|



ROTARY YOUTH LEADERSHIP AWARDS  
CAMP RYLA



WAIVER AND MEDICAL AUTHORIZATION

I/We, \_\_\_\_\_ and \_\_\_\_\_, being the  
parent(s) or guardian(s) of \_\_\_\_\_, date of birth \_\_\_\_\_  
of \_\_\_\_\_  
(parent/guardian) (parent/guardian)  
(name of child) (child's date of birth)  
(complete home address, including city, state & zip code)

do jointly and severally agree that \_\_\_\_\_ may participate in the Rotary  
(name of child)

Youth Leadership Awards Camp (referred to as Camp RYLA) sponsored by the Rotary International District 5770, and in consideration of participation in this event and on behalf of the above named Child, his/her heirs and representatives, I/we agree to fully and forever release, discharge, indemnify and hold harmless Camp RYLA, Rotary District 5770, Goddard Youth Camp, their agents, representatives, servants, employees or invitees from any and all claims, demands, damages, causes or rights of action, present or future, whether the same be known or unknown, anticipated or unanticipated, resulting from or arising out of participation in such Camp RYLA.

**I/We further authorize the Camp Director, The RYLA camp nurse in attendance, or any other adult staff member to give all necessary consent for any necessary medical treatment, including doctor's care or hospitalization or both, to the same extent as I/we could if personally present, that may be required by the above named child while in attendance at this camp, and agree that said medical expenses will be incurred in my/our behalf and I/we agree to pay the same.**

I/We also acknowledge that I/we have notified the Camp Personnel of any special medical needs or information (see "Health Certificate/Parent's Evaluation" attached) required by the above-named child. I/We further state that we know of no medical or physical conditions which would prevent the above-named child from fully participating in the camp activities.

I/We also understand that all rules and regulations for the camp will be enforced and any violation by my child will result in a collect call to me with a possible request to come pick up my child with no refunds being given.

Dated: \_\_\_\_\_  
(Parent or Guardian Signature) (Parent or Guardian Signature)

Address: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Our Insurance Company \_\_\_\_\_

Policy # \_\_\_\_\_ Group # \_\_\_\_\_

Address \_\_\_\_\_

**ATTACH COPY OF HEALTH INSURANCE CARD**



# HEALTH CERTIFICATE EVALUATION



Camper's Name: \_\_\_\_\_

The activities in which your child will participate while at Camp RYLA are comparable to those experienced in high school, including physical education activities. Some activities may be very strenuous, and the heat is always a factor. The camp supervisors MUST know of any physical limitations, medications or recent medical treatments or surgeries that may affect your son's or daughter's welfare. While this will not limit their participation, special precautions can be taken to ensure their safety.

Please check all items listed below with Yes or No. If Yes, please give a brief description of the problem:

- | YES | NO  |  |
|-----|-----|--|
| ___ | ___ | FREQUENT OR SEVERE HEADACHES   |
| ___ | ___ | DIZZINESS OR FAINTING SPELLS   |
| ___ | ___ | UNCONSCIOUSNESS FOR ANY REASON   |
| ___ | ___ | EYE TROUBLE ( <i>not correctable with glasses</i> )                              |
| ___ | ___ | HEART TROUBLE  |
| ___ | ___ | HIGH OR LOW BLOOD PRESSURE   |
| ___ | ___ | CHRONIC OR RECENT EAR TROUBLE  |
| ___ | ___ | SIGNIFICANT ABDOMINAL TROUBLE ( <i>including hernia</i> ) UNLESS CORRECTED       |
| ___ | ___ | EPILEPSY   |
| ___ | ___ | HEAD INJURY  |
| ___ | ___ | NERVOUS TROUBLE OF ANY SORT  |
| ___ | ___ | ASTHMA OR ANY BREATHING DISORDER   |
| ___ | ___ | INJURIES ( <i>requiring hospitalization</i> ) OR SURGERY WITHIN THE LAST 5 YEARS |
| ___ | ___ | ANY ALLERGIES ( <i>including allergies to medications</i> )                      |
| ___ | ___ | DIABETES OR HYPOGLYCEMIA   |
| ___ | ___ | CURRENT MEDICATIONS ( <i>please list below</i> )                                 |
| ___ | ___ | OTHER ( <i>please specify any medical conditions not listed above</i> )          |

IF YES ON ANY OF THE ABOVE PLEASE DESCRIBE HERE:

I hereby certify that to the best of my knowledge and belief the health of the camper is as shown above.

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date



**Camp RYLA  
College Scholarship Application**



Post Office Box 1533, Norman, OK 73070  
Bob Usry, Director (405) 623-3700

**\$500.00 Achievement Scholarship**

*\*Based on Academic Accomplishment as well as Economic Need*

**Please Return Application to Bob Usry at above address by December 31, 2024**

**Name:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Parent's Name:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**GPA** \_\_\_\_\_ **ACT** \_\_\_\_\_ **SAT** \_\_\_\_\_

*(Please attach a copy of your High School Transcript)*

**High School Activities:**

**Honors and Awards:**

**Community Service:**

**Personal Interests:**

**Special Talents:**

**Employment History:**

**Plans for the Future:**

**FINANCIAL NEED:** In the space provided, please indicate your family's adjusted gross income as referenced on the most recent IRS Tax Return. Please be assured this information will be treated with the utmost confidentiality.

_____	Under \$15,000	_____	30,000 to 34,999
_____	15,000 to 19,999	_____	35,000 to 49,999
_____	20,000 to 24,999	_____	50,000 to 64,999
_____	25,000 to 29,999	_____	Over 65,000

Total number of family members living at home? \_\_\_\_\_  
Is this a single parent household? \_\_\_\_\_ Yes \_\_\_\_\_ No  
Number of dependents in your family including yourself? \_\_\_\_\_  
Ages \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.  
Number presently attending college \_\_\_\_\_.  
Do you have siblings that are not presently attending college but plan to attend within the next two to four years? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If there are more than one, please indicate how many. \_

Would you please share any other factors that address financial need and that may be helpful in evaluating your application for this scholarship.

Please list other scholarships that you have received and the amount of each scholarship.

Name of Scholarship \_\_\_\_\_ Amount \$ \_\_\_\_\_

Name of Scholarship \_\_\_\_\_ Amount \$ \_\_\_\_\_



Have you made application for any other scholarships, but, as of this date have not received notice? \_\_\_\_\_Yes \_\_\_\_\_No

Please list the names of any pending scholarships.

Have you completed the FAFSA? \_\_\_\_\_Yes \_\_\_\_\_No  
Did you qualify for a PELL GRANT? \_\_\_\_\_Yes \_\_\_\_\_No

Please describe below why you want to be a recipient of, and what prompted you to make application for, the ROTARY YOUTH LEADERSHIP AWARDS' Achievement Scholarship.

**We appreciate your making application for our scholarship. We commend you on your efforts in preparation for a college career.**



## Information for Campers and Parents



### BRING TO CAMP

Twin-size bedding and pillow  
Toiletries  
Soap and towels  
Rain gear  
Flashlight  
Insect repellent  
Suntan lotion or sunscreen  
Swim shoes (optional)  
Swimsuit and cover-up or T-shirt  
Beach towel  
Treaded tennis or hiking shoes (mandatory)  
Shorts and cool comfortable clothing for entire week  
Any other necessary items suitable for camp

LIFEGUARDS – Bring lifeguard credentials with you to camp!

### EMERGENCY CONTACT During Camp RYLA, June 17-21, 2024

Goddard Youth Camp  
(580) 993-3333

*The above phone should only be used in case of emergency as a means to reach a camper during Camp RYLA. Goddard will be unable to assist with any other questions or information.*

*Questions regarding Camp RYLA should be directed to the local Rotary Club RYLA Chairperson or to Bob Usry, Rotary District RYLA Chairperson, (405) 623-3700 or Ellen Usry (405) 623-3702*

Photo/Video/Audio Release Form

I hereby grant to the ROTARY YOUTH LEADERSHIP AWARDS (RYLA) CAMP, or those acting upon their authority, the unqualified right and permission to reproduce, copyright, publish, circulate, and otherwise use photographs, video and/or voice recording of me.

I waive the right to inspect or approve the finished photographs, films or tapes, or the uses to which they may be put.

I hereby release all rights to and interest in all prints, tapes, and other reproductions thereof, and do hereby release RYLA and Rotary International from any and all rights, claims, or actions against them on account of the use or publication of these images or recordings.

I understand and agree that any audio, video, or still image recordings made of me may be featured in videos/audio and/or print publicity for Rotary or RYLA.

**I have read and understand the release statement above and hereby agree to its terms and conditions.**

Signed: \_\_\_\_\_

Print Name: \_\_\_\_\_

**Please print names of all subjects if underage:**

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