

2020 Rotary Youth Leadership Awards Application

Student Information (required)

Last Name: _____ First Name _____ M.I. _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____

E-mail: _____ Gender: M F T-Shirt Size: _____

School: _____ Current GPA: _____

Current Grade: 10th 11th 12th _____ Other please list

Parent/Guardian Information (required)

Parent/Guardian Name: _____ (Last) _____ (First)

Emergency Contact Number(s): _____

E-mail: _____

Sponsoring Rotary Club Information (required)

Rotary Club Name: _____

Rotary Contact Person: _____ (Last) _____ (First)

Phone Number(s): _____ Email: _____

Student Involvement

Clubs and Organization's you belong to:

Awards/Honors: _____

Hobbies/Talents: _____

If you participate in sports, please list them: _____

Future Plans: _____

Work/Volunteer: Please list paid or volunteer work experience(s) and briefly describe it/them.

What Rotary Youth Services are you active in? (Interact, Rotaract, Youth Exchange)

Please explain why you want to participate in the Life Leadership Conference and what leadership means to you.

Student Medical Information (required)

Do you have physical, medical conditions or dietary restrictions? If so, please explain:

Known allergies: _____

Date of Last Tetanus Shot: _____

Physician's Name: _____ **Physician's Phone:** _____

Insurance Company: _____ **Insurance Co. Phone:** _____

Ins. Subscriber's Name: _____ **Insurance ID Number:** _____

May acetaminophen (such as Tylenol) be given to the student? Yes No

May stomach remedy medicines (such as Pepto Bismol) be given to the student? Yes No

Any additional information or special instructions: _____

**PLEASE ATTACH A COPY OF THE
STUDENT'S HEALTH INSURANCE CARD
TO THIS APPLICATION**

Photo Release

At various times throughout the Life Leadership Conference, Rotary District 6290 representatives will be taking digital images, photographs, and/or videotapes of the program for public educational, promotional and/or informational purposes. When/if you or your child's likeness or image is used in a publication, there will be no identifying information provided (i.e. child's name, personal information) and no compensation.

I give permission to representatives of the Life Leadership Conference and Rotary District 6290 to take and publish, in print, electronic, or video format, the likeness or image of my child and/or myself.

Student Signature

The Life Leadership Conference is an intensive leadership experience; and thus, **partial attendance is not allowed**. All applicants must be certain that full attendance will occur, if selected. As the student applicant, by my signature, **I hereby commit to attend the entire 2020 District 6290 Life Leadership Conference at Kettunen Center** from June 17 to 20, 2020 if selected for attendance. *If I fail to attend, I will reimburse the sponsoring Rotary Club the tuition cost paid on my behalf.* **NO APPLICATIONS WILL BE ACCEPTED AFTER MAY 1, 2020!** My signature below verifies that I understand and accept this policy.

Student Signature: _____ Date: _____

Parent/Guardian Signature

As parent/guardian, by my signature, I realize that participation in the Life Leadership Conference is voluntary; and thus, will not hold the sponsoring Rotary Club, Life Leadership Conference, Rotary District 6290, Rotary International, or any Life Leadership staff people and contractors liable for possible injury or loss that may occur during the program. I am also aware of and agree to comply with the policy of attendance, as stated above.

Parent Signature: _____ Date: _____

Sponsoring Rotary Club Signature

As the representative of my District 6290 Rotary Club, by my signature, I confirm my Rotary Club's sponsorship of the above named student applicant. I understand that it is my responsibility to assure that payment for my club's sponsorship is attached to this application, when submitted. **NO APPLICATIONS WILL BE ACCEPTED AFTER MAY 1, 2020.**

Club Representative Signature: _____ Date: _____

Attach Your Photo Here

Medical Questionnaire

The information gathered here is for safety and program modification concerns only. The District 6290 LLC staff are the only individuals who will see this information. Medical conditions do not necessarily inhibit participation.

Please Print:

Name: _____

Age: _____

Height: _____

Weight: _____

Do you have any physical limitations that may negatively affect participation? N Y
(If yes, please explain) _____

Are you currently taking any medication? N Y
(If yes, please explain) _____

Do you have or have you had any of the following: N Y
Epilepsy, Diabetes, Asthma, Heart/Circulatory problems, Vertigo, Joint Problems (Knee, shoulder, elbow),
Back Problems, Allergies
Please explain any items answered with a Y. _____

List any other medical conditions not mentioned above we should know about.

“I am in good physical condition and am capable of physical activity for an extended period of time.” “I freely offer this information and to the best of my knowledge it is accurate.

Signature of Participant Date

Signature of Parent/Guardian if applicable Date

Application Checklist- KEEP THIS FOR REFERENCE

To apply for the 2020 Life Leadership Conference, submit all of the following:

- This completed application (all 5 pages)
- Copy of student’s (or parent’s) Health Insurance Card
- Fee payment (paid by the Sponsoring Rotary Club; Payable to ‘District 6290 – Life Leadership Conference)
- Completed applications should be returned to Life Leadership Chair of the sponsoring Rotary Club

Application Process/Timeline

- Jan. 1-15 Application materials made available to District 6290 Rotary Clubs
- Jan. 15 Rotary Club provides application materials to prospective LLC applicants
- Mar. 1 LLC applicants complete application materials and return to Rotary Club
- Mar. 1 – May 1 Rotary Club forwards applications with proper payment to the district office.

Kathy Hegedus, Administrative Assistant
PO Box 381
Grand Haven, MI 49417

APPLICATIONS WILL NOT BE ACCEPTED AFTER MAY 1ST, 2020

Jun. 17 LLC program begins with check-in at 1:00 pm

PLEASE EAT BEFORE YOU REGISTER - NO LUNCH WILL BE PROVIDED ON THIS DAY

Jun. 20 LLC program ends at 3:00 pm

Schedule

Wed . Jun.17	1:00 pm	Check-in
Wed-Friday	7:30 am – 11:00 pm	Activities all day
Sat. Jun. 20	7:30 am – 3:00 pm	Activities/Departure

Things to bring

- A Great Attitude!
- Bed linens (twin), Mattress Pad, Pillow and Pillow Case **or a Sleeping Bag Cover / Comforter** (the building is air conditioned) **or a Sleeping Bag**
- Bath Towel, Hand towel
- Toiletries, etc.
- Casual, Comfortable Clothes for 3 days
- Tennis Shoes / Sneakers **(Closed Toe Shoes are Mandatory for many events!)**
- Rain Gear and sunscreen. There will be outdoor activities regardless of weather.
- Please be prepared to wear appropriate business clothing for two evening events. Nice dress, skirt for the ladies and dress pants, dress shirt and tie for the gentlemen.
- If you wish to participate in the Saturday Night Talent Show, please bring necessary materials. If you are an International student, please bring any electronic Powerpoint files, etc about your country and any other materials you wish to share.
- Photo ID
- Cell Phone – You may bring a cell phone with you. However, they must be left in your residence hall room, during all days' events.
- Electronic Devices – You may bring personal music devices like CD players, iPods, etc., but these may only be used during your free periods. You will be responsible for their security, if you choose to bring them.

Things NOT to bring

- Anything that may be taken for a weapon (pocket knife, etc.)
- Any potentially dangerous materials (fireworks, an elephant, etc.)
- Distractions. The RYLA program is an intensive leadership experience; and thus, students' full participation and active involvement is necessary.
- Tobacco, alcohol or illegal drugs.

Cancellations

Cancellations on or after May 15th, will result in no refund of any payment made. Rotary Clubs may choose a replacement, when possible, as determined by the LLC committee. If it is possible for the Rotary Club to choose a replacement in a timely manner, all necessary paperwork must be submitted for the replacement student, by May 15th. If it is NOT possible for the Rotary Club to choose a replacement, as determined by the LLC committee, the LLC committee may choose a replacement (possibly from another club) without a refund of the original club's fee payment.

For more information please visit the Rotary International District 6290
website www.ridistrict6290.org