

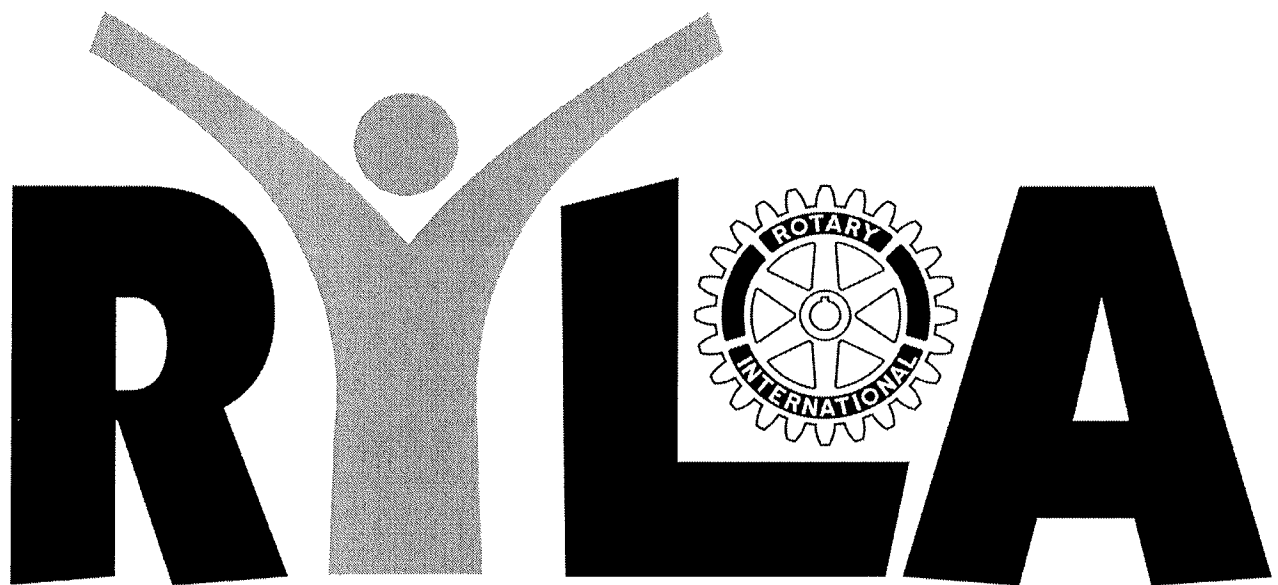
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Edition 2018

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District 6820

Rotary International



**Alumni Edition**

Camper Guide and  
Registration Packet

# Section 1-General Information and Background

## A. Purposes and Objectives of Camp RYLA

1. The Rotary Youth Leadership Award (RYLA) provides outstanding student leaders an opportunity to expand and hone their leadership skills at a one-week seminar called Camp RYLA, which is staffed and operated by volunteer Rotarians from District 6820.
2. The Objectives of Camp RYLA are:
  - a To provide an atmosphere in which future leaders will experience democratic living that will aid them in developing sound values.
  - b To promote an environment that will provide each individual with a basis for insight and understanding for intelligent leadership.
  - c To expose the youth leaders to some opportunities and challenges of life in a free democratic society.
  - d To promote involvement that encourages the participants to think through and arbitrate conflicts of values.
  - e To introduce youth leaders to Rotary principles and Rotary Youth Programs.

## B. Background

1. Current high school seniors that attended RYLA for the prior year will be eligible to attend.
2. Camp RYLA consists of:
  - a Leadership training via:
    - Outstanding speakers from all across District 6820
    - Discussion Groups
    - Rap sessions with fellow campers and Rotarian staff members.
  - b Activities to include:
    - Facilitated Discussion
    - Team building projects
    - Service Project
  - c Fellowship with student leader peers
  - d Campers make friendships that will last a lifetime!



**Application**  
**Rotary Youth Leadership Awards**  
**2018 Edition Alumni**

April 19 – April 21, 2018 Twin Lakes Conference Center Florence, MS

Sponsoring Rotary Club \_\_\_\_\_

Club RYLA Chairperson \_\_\_\_\_

High School \_\_\_\_\_

Full Name: \_\_\_\_\_ | Age: \_\_\_\_\_ | Grade: \_\_\_\_\_

Name you wish to be called: \_\_\_\_\_ | High School: \_\_\_\_\_

Cumulative Grade Point Average: \_\_\_\_\_ | T-Shirt Size: \_\_\_\_\_ | Male      Female

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

City: \_\_\_\_\_ | State: \_\_\_\_\_ | Zip: \_\_\_\_\_ | Birth Date: \_\_\_\_\_

Home Phone: (     )     -     \_\_\_\_\_ | Parent's Cell Phone: (     )     -     \_\_\_\_\_

Parent's Work Phone: (     )     -     \_\_\_\_\_ | Camper's Cell Phone: (     )     -     \_\_\_\_\_

Camper's Email Address: \_\_\_\_\_

**Academic Accomplishments:** (Honor Roll, Awards, Accelerated/Special Classes)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



## Packing List

- “School appropriate” attire for Thursday and Friday (a camp t-shirt will also be provided)
- Business casual clothing for Saturday graduation (guys-slacks and a dress shirt, ladies-slacks, skirt/blouse, or dress)
- Pillow, sleeping bag, or oversized-twin bed linens, blanket may be desirable
- Bath towels and wash cloths (laundry bag)
- Hair dryer
- Personal hygiene/toiletry items (toothbrush, tooth paste, shampoo, deodorant, etc)
- Comfortable shoes
- Light jacket/sweater in case conference room is cool
- Appropriate clothing for the ropes course
- Phone charger
- Medications **listed on your Statement of Camper’s Health** (there will be no sharing of medications – including medications for headaches, etc)
- Any specific snacks your child might prefer in the room (we will provide a variety of snack items and drinks)

## Prohibited Items

In the tradition of all fine, quality camps, we have the following list of **prohibited items**:

All tobacco products and paraphernalia – this includes vaping devices, e-cigarettes

All drugs – unless prescribed to the camper and identified on the Statement of Camper Health form

Alcohol

Firearms

Knives or other items that may be used as weapons

Inappropriate, revealing, or offensive clothing (including logos or slogans)

## Communication in case of emergency

**Steve Jackson                      601.248.3557**

**Bill Walker                          662.549.4676**

**Twin Lakes                          601.845.6858**

**As always in critical emergency dial 911**

## Statement of Camper's Health

(Developed and Approved by the American Camping Association and American Academy of Pediatrics)

**Health History** (Yes or No – If yes give approximate dates):

Frequent Colds \_\_\_\_\_ Kidney Trouble \_\_\_\_\_ Chicken Pox \_\_\_\_\_

Frequent Sore Throat \_\_\_\_\_ Bed Wetting \_\_\_\_\_ Measles \_\_\_\_\_

Sinusitis \_\_\_\_\_ Heart Trouble \_\_\_\_\_ German Measles \_\_\_\_\_

Abscessed Ears \_\_\_\_\_ Athlete's Foot \_\_\_\_\_ Mumps \_\_\_\_\_

Bronchitis \_\_\_\_\_ Sleep Walking \_\_\_\_\_ Whooping Cough \_\_\_\_\_

Fainting \_\_\_\_\_ Rheumatic Fever \_\_\_\_\_ Tuberculosis \_\_\_\_\_

Convulsions \_\_\_\_\_ Constipation \_\_\_\_\_ Diabetes \_\_\_\_\_

Stomach Upsets \_\_\_\_\_ Poliomyelitis \_\_\_\_\_

Serious Ivy, Oak, or Sumac Poisoning \_\_\_\_\_

Operations or Serious Injuries \_\_\_\_\_

**Allergic Reactions to:**

Bee Sting \_\_\_\_\_ Penicillin \_\_\_\_\_ Other drugs \_\_\_\_\_

Any medicine currently being taken? \_\_\_\_\_

Any specific activities for which camper's health would be questionable? \_\_\_\_\_

General Statement of camper's health \_\_\_\_\_

Prescribed or parent approved medications your child will bring \_\_\_\_\_

**Please attach a copy of camper's health insurance provider card.**

**Important Notice – If the camper's health changes after the submission of this health statement, or if the camper has been exposed to any communicable disease during the three weeks prior to camp attendance, the RYLA Camp Administrator must be notified prior to attendance.**

## Liability Release

**(To be signed by both parents or guardian and camper applicant. Camper cannot participate without this release)**

General Release;

In consideration of being permitted to participate in Camp RYLA and all associated activities.

I/We have read the Camp RYLA Activities statement in the Camp RYLA Camper Guide, distributed to each student with this application. I understand that they carry some risk and that the camper will be expected to participate in those activities. I understand that these activities are a part of what has made the Camp RYLA program so successful in the growth of young people and that my child, henceforth referred to as "Camper", has my approval to participate in all the activities of the camp.

Camper, for himself or herself, his or her spouse, parents, legal representatives, heirs, and assigns, hereby releases, waives and discharges Camp RYLA, Rotary, its officers and members, all promoters, sponsors, advertisers, owners, and lessees of the premises upon which Camp RYLA is conducted, and each of them, their officers and employees (referred to hereinafter as "Releases") from all liability to Camper, Camper's spouse, parents, legal representatives, heirs, and assigns, for any and all loss or damage, and any claim or damages resulting therefrom, on account of injury to Camper's person or property, even injury resulting in the death of Camper, whether caused by the negligence of Releases or otherwise while Camper is participating in Camp RYLA activities.

Camper and Parent or Guardian agrees to indemnify Releases and each of them from any loss, liability, damage, or cost they may incur due to the presence of Camper in or upon Camp RYLA premises or activities, whether caused by the negligence of Releases or otherwise.

Camper and Parent or Guardian hereby assumes full responsibility for the risk of bodily injury, death, or property damage, due to the negligence of Releases or otherwise, while in or upon Camp RYLA premises or activities, and while competing, officiating in, working, or for any purpose participating in Camp RYLA activities.

Camper and Parent or Guardian expressly agrees that this release, waiver, and indemnity agreement is intended to be as broad and inclusive as permitted by the laws of the State of Louisiana; and that if any portion hereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in legal force and effect.

Medical Release:

In the event emergency medical attention is required for a child at Camp RYLA, the providing of the attention will not be construed as an admission of liability on the part of Camp RYLA and all costs for emergency treatment and care must be borne by the parents or guardians of the involved child. Should Camp RYLA have voluntary insurance coverage to cover such expenses, such coverage will be limited to the excess over any valid and collectible insurance carried by the injured Camper's parents or guardians.

In case of medical emergency, I understand that every effort will be made to contact parents or guardians of Campers. In the event I cannot be reached, I hereby give permission to the physician selected by the camp director to hospitalize, secure proper treatment for, and to order injection, anesthesia or surgery for my Camper as named herein.

I support my child's/ward's application to Camp RYLA and I agree that if he or she is selected to attend Camp RYLA, he or she will complete the entire program. I understand that my child/award will be asked not to attend Camp RYLA if illness or an emergency will preclude him or her from participating fully in all RYLA activities.

IN WITNESS WHEREOF, Camper and Camper's parents or guardians have executed this release at:

\_\_\_\_\_ In the State of \_\_\_\_\_

This \_\_\_\_\_ day of \_\_\_\_\_ 2017 \_\_\_\_\_

Student: \_\_\_\_\_

Parent or Guardian: \_\_\_\_\_

## Photography Release for Minor Child or Children

I hereby authorize Rotary Youth Leadership Award Camp, hereafter referred to as "RYLA", to publish photographs taken during camp of myself and/or the minor child or children listed below, and our names and likenesses, for use in RYLA's print, online and video-based marketing materials, as well as other RYLA publications.

I hereby release and hold harmless RYLA from any reasonable expectation of privacy or confidentiality for myself and for the minor child and children listed below associated with the images specified above. Further, I attest that I am the parent or legal guardian of the child or children listed below and that I have full authority to consent and authorize RYLA to use their likenesses and names.

I further acknowledge that participation is voluntary and that neither I, the minor child, nor minor children will receive financial compensation of any type associated with the taking or publication of these photographs or participation in RYLA marketing materials or other camp publications. I acknowledge and agree that publication of said photos confers no rights of ownership or royalties whatsoever.

I hereby release RYLA, its contractors, its employees and any third parties involved in the creation or publication of RYLA publications, from liability for any claims by me or any third party in connection with my participation or the participation of the minor children listed below.

### Authorization:

Printed Name: \_\_\_\_\_

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

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

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

Relationship to Children: \_\_\_\_\_

### Names and Ages of Minor Child:

Name: \_\_\_\_\_ Age: \_\_\_\_\_



*2018 District 6820  
Rotary Youth Leadership Awards  
Alumni  
"Service Above Self"  
Essay Submission Guidelines*

***"Whatever Rotary may mean to us, to the world it will be known by the results it achieves." - Paul P. Harris***

Since 1905 Rotarians have been meeting together to to exchange ideas, form meaningful, lifelong friendships, and give back to their communities while serving selflessly around the world.

District 6820 is proud to focus on the Four-Way Test as part of our District RYLA conference. To take things a step further, Alumni candidates are required to submit a 750 word essay on how they have lived the Rotary motto "Service Above Self" out loud over the past year.

**Guidelines:**

- Submissions should be 750 words, typed, and double-spaced
- Submissions should be emailed to [District6820RYLA@gmail.com](mailto:District6820RYLA@gmail.com) by no later than midnight on Wednesday, March 07, 2018.

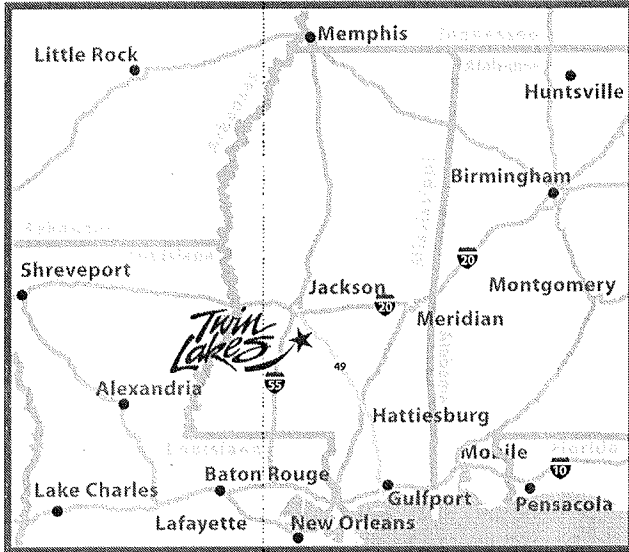




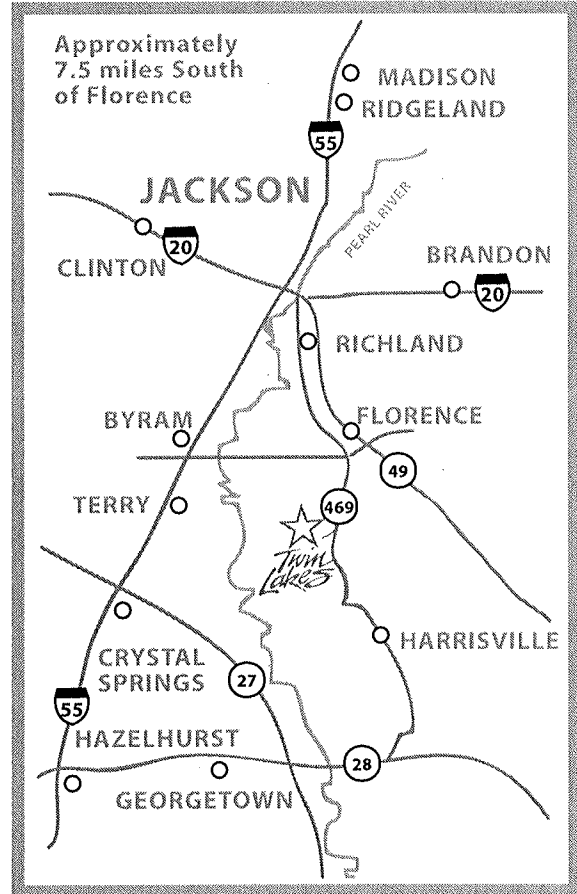
Camp and Conference Center  
*A ministry of First Presbyterian Church, Jackson, MS*

## Directions

### Regional Map



### Local Map



#### From Highway 49 South:

Turn West into FLORENCE, onto Highway 469 South. Cross over the railroad tracks and turn left at the next stop light to continue on 469 South. Follow 469 South 7.5 miles and turn right onto Twin Lakes Road. Finally, turn right onto Milner Road. Welcome to Twin Lakes!

#### From I-55:

Take the BYRAM exit (exit 85), traveling East on Florence-Byram Road across the Pearl River. At the 4-way stop, continue East until you come to the stop light in downtown FLORENCE. Turn right at the light onto Highway 469 South. Follow 469 South 7.5 miles and turn right onto Twin Lakes Road. Finally, turn right onto Milner Road. Welcome to Twin Lakes!

#### From Jackson-Evers International Airport:

Travel South on Airport Road through the round-about and across Highway 80. Merge right onto I-20 West. Take the US-49 South exit (Exit 47) toward FLOWOOD / HATTIESBURG. Turn left to take the ramp onto Highway 49 South toward HATTIESBURG. Travel 8.8 miles to FLORENCE. Turn right onto Highway 469 South. Cross over the railroad tracks and turn left at the next stop light to continue on 469 South. Follow 469 South 7.5 miles and turn right onto Twin Lakes road. Finally, turn right onto Milner Road. Welcome to Twin Lakes!