



**Rotary Youth Enrichment Program
(RYPEN)
2021 Application Form**

**RYPEN Chairperson
Jarrad Cartmill
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Email: jarrad.cartmill@gmail.com**

Camp Bornhoffen 9am Thursday 13th May – 1.00pm Sunday 16th May

Please note: If you have previously attended a RYPEN camp you cannot apply a second time. Sorry!

Cost per awardee: \$295.00

Part A : Personal Information

Applicants Name

Surname: _____

First Name: _____

Preferred Name: _____

Gender: M F (Please circle)

Date of Birth: _____

Age as of 1st May _____

Residential Address

Street Number: _____

Suburb/Town: _____

State: QLD NSW (Please circle)

Postcode: _____

Postal Address (if different to Residential)

Street/P.O. Box Number: _____

Suburb/Town: _____

State: QLD NSW (Please circle)

Postcode: _____

Contact Details

Home Phone: _____

Mobile: _____

Email: _____

School Information

Name of School applicant attends: _____

Grade applicant is currently in: _____

Skills and Attributes:

Positions held within school leadership team (if any): _____

Involvement within:

a) Sporting Teams: _____

b) Debating teams: _____

c) Music and Drama _____

d) Other: _____

Level of Participation in Extra-Curricular School Programs: _____

What does this involve: _____

Level of participation in Community activities: _____

What does this involve: _____

General Information

How did you hear about RYPEN? _____

What would you like to achieve from attending RYPEN? : _____

How will you get to RYPEN (Please circle)

Driven by parents

Driven by Rotarian

Require Transport

Other (please explain) _____

Shirt Size (please circle)

XS S M L XL XXL Other

Declaration by Applicant

- ✓ I agree that my contact details (Phone & Email address) be made available to the sponsoring Rotary Club's representative.
- ✓ I agree that I will NOT smoke, use non-prescription drugs, drink alcohol or use personal electronic devices such as mobile phones, laptops and iPods etc. while attending RYPEN.
- ✓ I will surrender my mobile phone on arrival or leave it at home.
- ✓ I agree to abide by the camp rules and all directions from the camp leaders.
- ✓ **I approve / I do not approve** (please circle one option) for my images/videos to be used in any or all promotional/marketing for RYPEN and Rotary District 9640 during and after the seminar.
- ✓ I also confirm that I have not attended a RYPEN camp previously.

Applicants Signature: _____ **Date:** _____

Family Information

Parent's /Guardian Names:

Parents: 1. _____ 2. _____

Guardians: 3. _____ 4. _____

Parent's /Guardian and Emergency Contact Details:

Home Phone: _____ Mobile: _____

Email: _____

Name and Contact details of emergency contact: _____

Declaration by Parent's Guardians

- ✓ I (Name of parent Guardian) give permission for
..... to attend the RYPEN to be held at
Name of child
Camp Bornhoffen on
- ✓ **I give/ I do not give** (please circle an option) the RYPEN committee permission to use appropriate photos of my child/children for the purposes of promoting Rotary Youth programs, and for use on social media.
- ✓ I agree to pay the sponsoring Rotary Club the gap between the pledge by the rotary club and the actual cost of the seminar.

Signature of parent/guardian _____ Date: _____

Sponsoring Rotary Club Information

Name of Rotary Club: _____

Postal Address: _____

Contact Person for Club: _____ Position: _____

Mobile: _____ Email: _____

Club Responsibilities: The club acknowledges that:

- ✓ it has the right to choose the attendee they will sponsor,
- ✓ it can send more than one attendee to RYPEN,
- ✓ it will be invoiced for full the cost of the seminar and is responsible for full payment of fees 2 weeks prior to the commencement of RYPEN
- ✓ it can nominate the amount the club will pledge towards the cost of the seminar,
- ✓ it is responsible to ensure that the attendee/family knows the amount that they are to contribute towards the cost of the seminar
- ✓ it is responsible to arrange a financial agreement with the attendee /family about payment of the gap that remains between the club's pledge and the actual cost of RYPEN,
- ✓ that in the instance the applicant does not attend that due to costs outlaid for accommodation and catering:
 - a. It will be obligated to pay the agreed pledged amount,
 - b. There will be no refund.
- ✓ the declaration of the club must be signed prior to attendee being accepted to attend

Declaration of the Club:

- ✓ The Rotary club of _____ agrees to sponsor
_____ to attend the RYPEN.
Name of applicant
- ✓ The club acknowledges that in the instance the applicant does not attend that due to costs outlaid for accommodation and catering:
 - c. It will be obligated to pay the agreed pledged amount,
 - d. There will be no refund.

Signature of Club Representative _____ Date: _____

Please Note: Part B: Medical History of the application must be completed and submitted at the same time as Part A of the Application.

Confidentiality Statement

The **RYPEN** committee is committed to maintaining all personal information provided by the Awardees and their families in accordance with the Australian Privacy Principles. Information collected will be stored in a confidential manner and access granted as outlined in the Declaration by Applicant section of this application form. Procedures will be implemented to ensure that this information is protected and secure and remains confidential.

Application and Payment details:

Please forward completed application form by email by 1st MAY 2021
to
Jarrad Cartmill: jarrad.cartmill@gmail.com

Payment of \$295.00 to be made via Direct Bank Deposit to:
Rotary International District 9640 Limited. BSB: 084 462 Account No: 796395692
You can do this via the Internet or at Your Local Bank

NB: Please indicate that the deposit is for RYPEN and the name of the Sponsor Club
Send Copy of Receipt of Payment by email to Jarrad Cartmill (above)

Note here with a cross (X) that payment has been made ☐

Admin Use Only

Amt Paid:

Club Pledges:

Date:

Name of Committee Member:

Attendee's Contribution:

Receipt No.: