

Congratulations!!

You have been selected to attend Rotary District 5170's
RYLA 2008 – A Leadership Experience!

You have been awarded this scholarship for your demonstration of overall leadership qualities, both in and out of your school environment. Your local sponsoring Rotary Club has funded your scholarship of \$415. In order to receive your scholarship and attend this leadership experience, please do the following:

- Complete the Camper Registration Form.
- Read and sign the Camp Rules and RYLA's Statement of Values and Commitments.
- Sign and date the Camper's Statement.
- Have your parent's read the Camp Rules and RYLA's Statement of Values and Commitments. Then have them sign and date the Parent's Statement.
- Have a Medical Professional complete the Medical Statement or provide a copy of a physical exam performed by a Medical Professional within the last two years.
- Return the Registration Form to your sponsoring Rotary Club Advisor by **April 30, 2008**.
- You will receive a letter as to whether or not you have been accepted.

If you do not attend this leadership camp, your sponsoring Rotary Club will lose funding for your scholarship.

LEADERSHIP DEVELOPMENT ACTIVITY PREFERENCES

During your week at camp you will be asked to participate in one of the following leadership development activities. Please rank your order of preference (1st, 2nd, 3rd, etc...1 being your first choice).

_____ ***Band & Chorus:** The opportunity to come together with various musical talents and disciplines. Please bring music sheets and instruments if you have them.

_____ ***Camp Service Project:** Opportunity to expand the idea of “service” locally both during and after camp (i.e. Environmental awareness, SF AIDS Walk-create awareness, presentation, fundraising, and organize participation for the walk).

_____ ***Dance Committee:** Preparation and planning for the RYLA Ball, including deciding on a theme, and making decorations. This is a chance for artistic expression and creative input.

_____ ***Entertainment:** Opportunity to entertain campers and staff through skits, games, and parodies.

_____ ***RYLA Studio:** A multimedia production of daily newscasts of the “goings on” at camp to be showcased throughout the week and posted real-time to the website.

_____ ***Speech and Debate:** An opportunity to participate in a forum of public speaking either individually or as a group. You are encouraged to bring any favorite material such as a book, poem, or any original content.

_____ ***Sports Activities Committee:** Preparation and planning of free time activities, including sporting events (basketball, volleyball, etc.), relay race, and ropes course throughout the week.

CAMPER'S STATEMENT-PARENT'S STATEMENT-DOCTER'S CERTIFICATE

Camper's Statement

I understand that the Rotary sponsored Camp RYLA will be held at Camp Campbell near Boulder Creek, California and I agree that I will be able to attend.

I have read and agree to obey the RYLA Camp Rules and Values and Commitments (copy enclosed) and to travel to and from Camp by transportation arranged through Rotary.

I further agree to the rule of no drugs, alcohol, or cigarette use while at RYLA.

Date _____ / _____ / _____ Camper's Signature _____

Parent's Statement

I give my consent for my son/daughter to attend the Rotary Youth Leadership Award Camp. I understand that the Camp has liability insurance and that health services are available, and I hereby authorize Camp officials to arrange whatever health service they consider necessary. I have also entered both a daytime and evening phone number where I can be reached in case of emergency.

To the best of my knowledge my son/daughter is in good health and I give my permission for attendance at the RYLA Experience and to participate in camp and sports activities. I have read the RYLA Camp Rules and Values and Commitments and gone over them with my son/daughter. I understand that if my son/daughter is found to be in possession of liquor, drugs, cigarettes, other unidentified medications or has caused a disruptive act to the Camp or Campers, he/she will be sent home at my expense.

Parent or Guardian's Signature: _____

Authorization: I hereby give consent to treatment of my son/daughter while at Camp RYLA. I further give my permission for you to use any photos, videos or sound recordings of my son/daughter in any of your future promotional materials.

Date _____ / _____ / _____ Parent's Signature _____

Doctor's Certificate

This is to certify that _____
Camper's First, Last Name

Has been examined by a health medical professional in the last two years and was found to be in good health. If you have participated in a sport this past year, submit your medical form from school as your Doctor's Certificate.

This is to certify that _____

Has been examined by a health medical professional in the last two years and was found to have the following medical problems and should not participate in a camp activities and sports.

His/her last tetanus-toxoid immunization was: _____

Additional Comments: _____

Date: _____ Signature _____

Please Print Name:

**ATTENTION: THIS FORM MUST BE RETURNED TO YOUR LOCAL ROTARY RYLA CONTACT
NO LATER THAN April 30, 2008**

PERMISSION TO DISPENSE MEDICINE

Camper's name: _____ Age: _____ Date of Birth: ____/____/____

Relevant medical history: _____

Allergies: _____

Current medications: _____

I authorize the camp nurse to administer these medications for the following conditions:

Benadryl (or another type of antihistamine)
 In case of a mild allergic reaction

Ibuprofen (or similar)
 In case of cramps
 In case of headaches
 In case of mild pain

Pepto-Bismol (or similar)
 In case of upset stomach

The above statement allows us to provide medical care even if you are unavailable. Any medications that you do not authorize will not be administered until the camp medic has contacted you by phone and both the camp medic and another adult receive verbal permission from you to do so. Whether or not you give permission in advance, you will be contacted by phone if a serious condition arises.

Additional comments? _____

Parent Signature: _____ Date: ____/____/____

PARTICIPATION INFORMATION FORM AND RELEASE OF LIABILITY

YMCA of the Redwoods- Camp Campbell

To be completed by participant or parent/guardian if under 18 years of age

Name: _____ Group: _____ Date: _____

DISCLOSURE:

The YMCA Challenge Course involves a variety of activities including warm up's, games, group initiative problems, low and high challenge course elements, and possibly other rigorous physical adventure activities. The level of participation in the YMCA Challenge Course is entirely voluntary at all times. Safety measures have been designed into the program (trained staff, safety equipment, and strict safety standards) to safeguard all participants against possible injury. As with any program of this type, there is a risk that must be assumed by each participant.

I have read and understood the above. (Initial here): _____

PARTICIPANT INFORMATION

Certain health/medical information must be made known to the instructor(s) conducting the program so that they are prepared to respond appropriately if the need arises. This information will be held in confidence. This form must be completed and returned to your group coordinator or the YMCA of the Redwoods prior to participating in any activities.

1. Name: _____ Soc. Sec. #: _____

Address: _____ City: _____ State: _____ Zip: _____

Day Phone: _____ Evening Phone: _____

Parent/Guardian Name: _____ Day Phone: _____

2. Do you have health/accident insurance? (Circle one) **YES NO**

If yes, name of company: _____ Policy Number: _____

3. Do you have any limiting physical disabilities, or conditions (temporary or permanent)? (Circle one) **YES NO**

If yes, identify and explain: _____

4. Are you currently taking medication (prescribed or otherwise)? (Circle one) **YES NO**

If yes, identify and explain: _____

5. Please list any allergies, especially allergic reactions to medications: _____

RELEASE OF LIABILITY

I understand that parts of the YMCA Challenge Course program may be physically or emotionally demanding. I affirm my health is good, and that I'm not under a physician's care for any undisclosed condition that may endanger my health or that of other participants. I recognize the inherent risks injury or disability in the YMCA Challenge Course activities. I understand that each participant must assume the risk of physical injury that could result from any of these activities. I release the YMCA of Santa Clara County and its staff members from all liability for any injury to me from participation in the YMCA Challenge Course program and its staff members from all liability for any injury to me from my participation in the YMCA program.

I have read and understood the above. Initial here: _____

MEDICAL PERMISSION AGREEMENT

I hereby give the YMCA camp staff the permission to assume responsibility for securing necessary medical care for the well being of **(participants name)** _____ as long as he/she is a participant in the YMCA program. In case of a sudden medical emergency, I give the YMCA staff permission to secure any needed medical or surgical care. I understand that the YMCA and its staff are not responsible for any medical expenses incurred.

Participant's Signature *(if at least 18 years old)*

Date

Parent or Guardian Signature *(if participant is under 18 years old)*

Date

FOR OFFICE USE ONLY: Participation Information Form and Release of Liability reviewed by:

Signature: _____ Title: _____ Date: _____

THE RYLA EXPERIENCE CLOTHING AND ITEMS TO BRING

Keep in mind that in this camp setting temperature will vary in any given 24-hour period by as much as 30 degrees, so be PREPARED.

We encourage you to bring your camera with plenty of film, your musical instrument (and sheet music) if you are a musician, and athletic shoes for the sport periods. We can provide safe-keeping for such items, or you may keep them in your cabin if you prefer. Please note that we cannot be responsible for any valuables or lost items (i.e.: mp3 players, iPods, cell phones, etc...)

We suggest:

- That you identify each garment with markings that do not come off when the garment is wet.
- That you mark all your personal possessions in some manner.
- That you label your cameras and musical instruments (for band and choir), in particular, with a permanent manner.

Campers will be wearing their t-shirts during 99% of the time, except for 3 hours during free time.) Camp shirts must be worn at all times. These will be provided 2 shirts and 1 sweatshirt. Your tuition includes room & board as well as t-shirts and sweatshirts.

THINGS TO BRING

Appropriate Clothing:	Sleeping gear, etc...
RYLA T-shirt & RYLA sweatshirt (provided)	WARM sleeping bag
Shorts	Flip-Flops for shower
Long casual pants	Pillow (if you use one)
Undergarments	Laundry bag
Light jacket	Wash cloths/Towels
Long sleeve shirts (layered clothing highly recommended)	Flashlight (extra batteries)
Swimsuit	Stamped envelopes (for writing home, if you'd like)
Socks, undergarments, beanie, hat, visor	Toiletries (hairbrush, comb, toothbrush & paste, deodorant, shampoo, hand lotion, chap stick, insect repellent, etc...)

Prescription medication or any other meds you carry must be in containers bearing their prescription. OR if you have “over the counter” medicines or vitamins, they must be in readily identifiable containers.

RYLA AGENDA – TYPICAL PROGRAM SCHEDULE

<p>SUNDAY</p> <p>3:00 PM 4 – 5 PM</p> <p>5:00 PM</p> <p>6:00 PM 7 – 8 PM 8 – 9 PM</p> <p>9 - 10:30 PM 11:00 PM</p>	<p>Arrive at Camp Campbell! 1ST Cabin Meetings – Orientation with Counselors Welcome Program – General Assembly and Overview Dinner Opening Program – Leadership Team Activity Workshop Orientation: Band & Chorus, Entertainment, RYLA TV, RYLAzine, Dance, Speech & Debate, Service Project, Sports Staff Camp Fire Program Lights Out</p>	<p>WEDNESDAY</p> <p>8:00 AM 9 – 12 PM</p> <p>12:00 PM 1:00 – 3:30 PM 3:30 – 5:30 PM 6:00 PM 7 – 10:30 PM 11:00 PM</p>	<p>Breakfast Rotary In Action: Interact, Rotaract, Life Clubs, Youth Exchange, Rotary Scholars</p> <p>Lunch Activity Workshops Free Time / Sports Activities Dinner Staff Program Lights Out</p>
<p>MONDAY</p> <p>8:00 AM 8 -12 PM 12 PM 1 – 3:30 PM 3:30 -5:30 PM 6:00 PM 7 – 8 PM 8:30 – 10 PM 11:00 PM</p>	<p>Breakfast Leadership Modules Lunch Activity Workshops Free Time Dinner Leadership Program Continued Brother/Sister Cabin Discussions Lights Out</p>	<p>THURSDAY</p> <p>8:00 AM 9 – 11:50 AM 12 PM 1 – 3:30 PM 3:30 – 5:00 PM 5:30 PM 7 – 10 PM 11:00 PM</p>	<p>Breakfast Speech & Debate Program Lunch Activity Workshops Sports Activities/ Relay Race BBQ Dinner sponsored by Rotary Clubs Dance Lights Out</p>
<p>TUESDAY</p> <p>8:00 AM 9:00 AM 12:00 PM 1 -3:30 PM 3:30 – 5:30 PM 6:00 PM 7 -8:30 PM 8:30 – 10 PM 11:00 PM</p>	<p>Breakfast Leadership Modules Lunch Activity Workshops Free Time Dinner Leadership Program Finale Entertainment – Student Campfire Program Lights Out</p>	<p>FRIDAY</p> <p>8:00 AM 9:00 AM</p> <p>10:15 AM 11:30 AM</p> <p>12:00 PM</p> <p>12:30 PM</p>	<p>Breakfast Cabin Clean-Up, Final Photos & Pack Stuff General Assembly/ Farewell Ceremony Prepare for Bus Departure Camp ground clean up</p> <p>Bag Lunch</p> <p>Bus Departure</p>

CAMP RULES

1. Once at Camp, no student may leave the campgrounds for any reason. Late arrivals the day Camp starts, or early leavers the day Camp ends, may do so only with written permission from a Parent or Guardian under emergency conditions. This permission slip must be brought with the student and put on file during Camp Registration. The Camp Director will verify by phone all such requests, so please enter the phone number where the parent or guardian can be reached during the day.
2. Swimming and other athletic activities are limited to "Free Time" periods of the scheduled day. All students are encouraged to participate in the varied sports activities, but it is not mandatory.
3. The end of Camp day may vary, but "lights out" and sleep time is strictly adhered to and any individual disturbing activity after this period is subject to disciplinary action with loss of privileges.
4. Campers must conduct themselves within all the activities of the Camp as to bring credit to themselves, their school, parents and sponsoring Rotary clubs.
5. All Campers must stay in their designated side of camp, males in their cabins and females to their side of cabins. If this rule is broken or you are caught in side that is off limits, you will be sent home immediately, at your parents' expense.
6. Please be respectful of our natural surroundings and of each other, there is **Absolutely NO Tolerance** for smoking, alcohol, drugs, or sex while at Camp.
7. Any prescription medications or "over the counter" must be fully identified on their container. Campers found to be in possession of unidentified medications or alcohol will be sent home from Camp, at their parents' expense. The same action applies to infractions of the Camp Rules.
8. Meals:
 1. Campers eat with their other cabin members, unless other procedures are announced.
 2. Each cabin, in rotation, set tables, do general hall clean up and is responsible for the dining hall maintenance.
 3. All hats and beanies are to be taken off during meal times.
9. A Camp **RYLA T-shirt** and **sweatshirt** are provided to all campers, which are to be worn all the time except for Free Time and at the Dance.
10. No jackets may be worn over your camp sweatshirt; we recommend layers of thermal or long sleeve shirts to stay warm. A hooded sweatshirt may be worn under your t-shirt or sweatshirt. Only exception to have jackets over your camp T-shirt and sweatshirt are for night time activities outside.

RYLA VALUES & COMMITMENTS

- 1. Camper Leadership Development** – RYLA exists to serve the leadership development needs of District 5170 high school young men and women. All of the actions of Rotarians, RYLA staff and volunteers must be done with the well being of our campers in mind.
- 2. Our RYLA Community** – RYLA is a community that is built on the Rotary foundation of "service above self." We strive to offer all participants a safe and fun learning environment. While we celebrate the diversity of all individuals, the major goal of the RYLA experience is to bring everyone together as one community.
- 3. Quality Programs and Workshops** – We are committed at RYLA to offer quality leadership and human relations skills training that require intensive camper planning and involvement. RYLA trainers and staff are dedicated to providing our campers with a productive learning experience through positive coaching and facilitation.
- 4. Teamwork** – Each RYLA camper, staff member and Rotary volunteer brings unique talents and skills to this camp. Respect, encouragement, cooperation, trustworthiness, and caring – we owe these things to each other.
- 5. Integrity** – The core values of Rotary are the **Four Way Test**. Rotary International relies on every camper, staff member, and volunteers to uphold high standards of ethical conduct and personal decorum.

Our good reputation in Rotary, the trust of camper's parents, and the goodwill of our YMCA hosts all depend upon the honesty and responsible behavior of each of us.

ROTARY'S FOUR WAY TEST

1. Is it the truth?
2. Is it fair to all concerned?
3. Will it build good will and better friendships?
4. Will it be beneficial to all concerned?