STUDENT APPLICATION DUE MARCH1, 2025 TO LOCAL ROTARY CLUB: MARTIN ROTARY CLUB,

P. O, BOX 432, MARTIN, TN 38237



December 1, 2024

#### District 6760 Rotarians,

It is time to start planning for the 2025 RYLA Program! This year, RYLA will be held from Tuesday, June 10, 2025, to Saturday, June 14, 2025, on the beautiful campus of Austin Peay State University, in Clarksville, TN. Applications for the 2025 RYLA Program are attached these are due on April 1st.

What is RYLA? Rotary Youth Leadership Awards (RYLA) is an intensive leadership program for young people ages 15-17. Organized by Rotary District 6760, RYLA allows participants to learn new skills through civic engagement and personal and professional development opportunities. Talented high school students are chosen from among their peers to attend a series of outdoor activities, leadership training events, seminars, etc. each June.

The RYLA program enables young people to debate issues of professional responsibility and human relations, improve leadership and communication skills, learn about businesses and institutions, and meet Rotarians while having fun and making friends. For young adults, RYLA provides the opportunity to refine skills and explore pertinent topics with their peers and elders.

RYLA emphasizes leadership, citizenship, and personal growth, and aims to:

- Demonstrate Rotary's respect and concern for youth by developing youth leadership skills and recognizing those who are making a positive difference in their communities
- Instill a lifelong commitment to service in young people and connect them with ongoing opportunities to serve through Rotary
- Fulfill Rotary's commitment to youth service by empowering young people through leadership development
- Provide an effective training experience for selected youth and potential leaders
- Encourage leadership of youth by youth

**See for yourself what RYLA is all about:** We created a short video that shows what we are doing at RYLA, learn more at: https://vimeo.com/837131927?share=copy

#### When and Where is RYLA?

The 2025 RYLA program will be held from Tuesday, June 10, 2025 to Saturday, June 14, 2025, at Austin Peay State University, in Clarksville, TN (<a href="https://www.apsu.edu">www.apsu.edu</a>). The schedule will be:

Tues. June 10th	9:00 am	Check-in
	11:00 – 10:30 pm	RYLA activities all day
Wed -Friday	7:30 am - 11:00 pm	RYLA activities all day
Sat. June 14th	7:30 am - 1:00 pm	RYLA activities
	1:00 pm - 3:00 pm	Graduation (family is invited to attend at APSU)
	3:00 pm	Departure

#### **How do Participants Apply?**

To apply for the 2025 Rotary Youth Leadership Awards (RYLA), potential participants should submit all of the following:

- A completed digital application
- A copy of the student's (or parent's) Health Insurance Card
- Fee payment (\$500 each; paid by the sponsoring Rotary Club; Payable to 'District 6760 RYLA')

Completed applications can be mailed by April 1st to:

District 6760 RYLA Committee c/o Robert L. Huffman 3925 Sango Road Clarksville, TN 37043

APPLICATION DUE TO MARTIN ROTARY CLUB MARCH 1, 2025 - P. O. BOX 432, **MARTIN TN 38237** 

#### Application Process/Timeline

Jan. 1	Application materials made available to District 6760 Rotary Clubs
Feb. 1 <sup>st</sup>	Rotary Club provides application materials to prospective RYLA applicants
Mar. 1 <sup>st</sup>	RYLA applicants' complete application materials and return to Rotary Club
Mar. 31st	Rotary Club forwards applications (with \$500 payment) to the RYLA committee
May 1 <sup>st</sup>	Official 2025 District 6760 RYLA Acceptance Letters sent to selected RYLA
	participants
June 10th	RYLA program begins with check-in at 9:00 am
June 14th	RYLA program ends with graduation, which will be held from 1:00 pm to 3:00 pm

#### Who is Eligible?

Young people, entering the 10th or 11th grade, who live or attend high school within the boundaries of Rotary District 6760 are eligible. Students entering another year of high school in the Fall 2025 (i.e.: 9th or 12th grade) may be considered; however, entering 10th and 11th grade students will be given preference.

#### **How Much Does It Cost....And Who Pays?**

FOR LOCAL ROTARY CLUB: The district subsidizes the cost of the program. All unsubsidized fees are paid for the participating student by the sponsoring Rotary Club. The cost of the 2025 RYLA program (paid by the sponsoring Rotary Club) is \$500 per participant. Payment should accompany a complete application, be made payable to 'District 6760 – RYLA', and be mailed by April 1st to:

District 6760 RYLA Committee c/o Robert L. Huffman 3925 Sango Road Clarksville, TN 37043

NOTE APPLICATION IS DUE TO LOCAL ROTARY CLUB BY MARCH 1, 2025

Cancelations on or after April 30<sup>th</sup> will result in no refund of any payment made.

#### Questions?

If you have any questions, please contact, Robert L. Huffman, at 931-265-7452 or d6760ryla@gmail.com

In Service, Robert L. Huffman District 6760 RYLA Administrative Committee

Carson M. Black District 6760 RYLA Co-Chair

## District 6760



### **Rotary Youth Leadership Awards (RYLA)Application**

## Student Information (required) Last Name: \_\_\_\_\_ First Name: \_\_\_\_ M.I.\_\_\_ Preferred Name for Badge: \_\_\_\_\_ Date of Birth: Home Address: City: \_\_\_\_\_ State: <u>TN</u> Zip Code: \_\_\_\_\_ Cell Phone: \_\_\_\_\_\_ ICE Phone: \_\_\_\_\_ Gender: \_\_ M \_\_ F T-Shirt Size: \_\_\_\_\_ E-mail: \_\_\_\_\_ Current GPA: Fall Grade: \_\_\_\_ 10<sup>th</sup> \_\_\_\_ 11<sup>th</sup> \_\_\_\_ Other (please list year) Parent/Guardian Information (required) Parent/Guardian Name: \_\_\_\_\_ (Last) (First) E-mail: \_\_\_\_\_ Guests at Graduation: \_\_\_\_ Sponsoring Rotary Club Information (required) Rotary Club Name: \_\_\_\_\_ Rotary Contact Person: \_\_\_\_\_ (Last) (First) Phone Number(s): \_\_\_\_\_ Email: \_\_\_\_\_

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TO MARTIN ROTARY CLUB

Student Involvement
What Rotary Youth Services are you active in?
Please explain why you want to participate in the RYLA program? (Attach additional sheets, if necessary.)
Clubs and Organizations 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.

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# 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 RYLA Program, Rotary District 6760 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 RYLA Program and Rotary District 6760 to take and publish, in print, electronic, or video format, the likeness or image of my child and/or myself.

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Student Medical Information (required)

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

Name of Student:
PARENTAL/GUARDIAN AUTHORIZATION; I do voluntarily consent to said minor's participation in all activities of the Rotary Youth Leadership Awards Camp (RYLA) to be held at Austin Peay State University. I understand that this leadership camp could involve physical activities including elevated rope apparatus high off the ground. Although these activities are well supervised by adults there is always an inherent risk of physical injury to the participant and I'm willing to have my child participate.  Initial:
MEDICAL TREATMENT RELEASE: I assume responsibility for any medical or treatment/transport fees or costs incurred directly or indirectly because of said minor's participation. I also authorize the representative(s) of Rotary District 6760 to arrange for professional care and treatment in case of medical emergency. I hereby give permission to the physician selected by the Rotarian(s) to hospitalize secure professional treatment for and/or to order injections, anesthesia and/or surgery for the minor named above. Initial:
INDEMNIFICATION/HOLD HARMLESS: In consideration of the Rotary Club, Rotary District 6760 and Austin Peay State University, I permit this minor to participate in Rotary Youth Leadership Awards (RYLA) and to engage in all activities related to the weekend program. I hereby assume the risk associated with participation & agree to hold the Rotary Club, Rotary District 6760, and Austin Peay State University, its committees, employees, as agents, as representatives, and volunteers harmless from any and all liabilities, actions, causes of action, claims or demand of any kind & nature whatsoever which may arise by or in connection with said minor's participation in any activities related to the Rotary Youth Leadership Awards (RYLA). The terms here shall serve as a release & the assumption of the risk for said minor, his or her heirs, estate, executor, administrator, and assignees as well as members of the family.  Initial:
I also take full responsibility for any valuables that the above-named participant takes to this camp, that could get lost or stolen and I am fully aware I have been advised that said minor should not bring any valuables. I hereby give permission for Rotary to post pictures of said minor participating in this event in Rotary publications including on its websites, social media, presentations, etc.  Initial:
I further consent to permit authorized Rotarians to contact said minor after the Rotary Youth Leadership Awards (RYLA) with respect to other Rotary programs and activities.  Initial:
A photocopy of this form is as valid as the original.  Initial:

**APPLICATION DEADLINE: MARCH 1, 2025 TO MARTIN ROTARY CLUB** 

# Rotary District 6760 Participant Code of Conduct

You have been selected for this Rotary Youth Leadership Awards program because you have been identified as a leader. This program will enhance your personal abilities and give you the opportunity to meet and share ideas with other leaders. Our speakers, activities, and discussion groups will provide you with many positive and helpful approaches to personal growth.

Rotarians are looking forward to sharing the RYLA experience with you. You are to attend all assigned activities.

While we require your acknowledgement of this Code of Conduct, as leaders, we are confident that you will behave in a manner your parents and sponsoring Rotarians would be proud of. Should any participant's conduct be considered unacceptable at any time by RYLA officials, that participant's parents/guardians will be contacted immediately to remove them from the Program.

We want the next RYLA to be welcome at APSU. Please leave the facilities and grounds as clean as when you arrived. Follow the requests of staff, report damage or breakage immediately to your Small Group Leader.

You are encouraged to approach all Rotarians or staff for assistance at all times.

#### **Procedures and Rules**

#### General:

- 1. You have made a commitment to attend RYLA from Tuesday to Saturday afternoon. If a conflict arises, and you can't attend the entire program, contact your sponsoring Rotary Club immediately per RYLA Cancellation Policy.
- 2. Transportation is NOT provided to or from the Program. Participants are expected to make their own arrangements with Parents/Guardians, or alternatively with their sponsor Rotary Clubs.
- 3. Help us maintain security at RYLA by wearing your nametag at all times.
- 4. If any person is injured or becomes ill, do not move him/her. Immediately contact your Small Group Leader, Rotarians, APSU staff, or call 911 if appropriate.
- 5. If you take medications, whether prescribed or "over-the-counter", each participant is responsible for retaining and securing medications in original containers and consuming only as prescribed.
- 6. Tobacco, alcoholic beverages, dating, and illegal drugs are not permitted at RYLA. A single violation will lead to dismissal from the Program.
- 7. Remain on site in designated areas. Do not leave the APSU Campus.
- 8. Use of cell phones and other electronic devices for texting and voice conversations is not permitted during meetings, activities, or presentations. If used inappropriately, they will be confiscated until the end of the day.
- 9. Treat everyone with respect. Discriminatory, foul, or abusive language, physical violence or threats, or sexual or lewd misconduct will not be tolerated. These behaviors will result in removal from the Program.
- 10. Any Participant that is removed from the Program for non-compliance with the Code of Conduct, will be responsible for reimbursing the sponsoring Rotary Club for the entire \$500 sponsorship fee that was paid by the Sponsoring Rotary Club within 14 calendar days.

#### **Dormitories:**

- 1. You will be assigned to a room with other participants. Select your bed and stow your personal gear in the space provided. Respect each other's belongings and space.
- 2. Lock your room at all times.
- 3. You will not be able to return to your room except at specific times in the schedule.
- 4. Be in your Room by "Lights-Out". Talking is allowed as long as it does not disturb others in your room.
- 5. There are separate Dormitory areas for males and females. Do not enter a room or Dormitory that is not assigned to you. Males are not allowed in female Dormitory areas, and visa versa.

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#### **Small Group:**

- 1. You will be assigned to a small leadership group. A RYLA Staff Member will be your Small Group Leader. You will meet your group in your designated area to participate in discussion groups, meetings and activities as a group throughout the Program.
- 2. Be on time to all meetings and remain in the meeting according to the schedule.

#### Dining:

1. Participants are responsible for notifying RYLA staff of any special dietary needs or allergies.

#### Student Signature:

Stauent Signature.	
applicants must be certain that full attendance will signature, <u>I hereby commit to attend the entire Di</u>	strict 6760 RYLA Program at Austin Peay State University,
if selected for attendance. I have read the Code of Co	onduct and agree to honor it.
Student Signature:	Date:
Parent/Guardian Signature	
will not hold the sponsoring Rotary Club, Rotary Yo International, or any RYLA staff people and contracthe program. I am also aware of and agree to comp	participation in the RYLA Program is voluntary; and thus, uth Leadership Awards, Rotary District 6760, Rotary tors liable for possible injury or loss that may occur during ply with the policy of attendance, as stated above <b>partial</b> sportation to and from RYLA at the APSU campus is not
\$500 RYLA Cancelation Fee Acknowledgement	
made possible by hundreds of volunteer hours from normal course of fundraising, to fund each Student	im is funded through sponsorships by local Rotary Club and in Rotarians. Each Rotary Club pays \$500.00, raised in the 's attendance. Since we solicit and collect donations from ble stewards of these donations. Our loss of these funds, is to charge a cancelation fee.
Commitment to Reimburse	
reimburse the Rotary Club providing my student's partials to attend or withdraws before any qualified su after 15 days prior to the Friday start of the program	, (print Parent/Guardian's name) hereby commit to program fees to attend RYLA if for any reason my student obstitute could be found. Any student who fails to cancel m will be subject to this cancelation fee. Prorated etion of the RYLA committee, should my student arrive late
Parent Signature:	Date:

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#### **Sponsoring Rotary Club Signature**

As the representative of my District 6760 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. We acknowledge the cancellation policy.

Club Representative Signature:	 Date:

Completed applications can be mailed with payment by April 1st to: B

District 6760 RYLA Committee c/o Robert L. Huffman 3925 Sango Road Clarksville, TN 37043

Email: d6760ryla@gmail.com

Phone: 931-265-7452

Checks Payable To: "District 6760 - RYLA"

#### **Application Checklist**

To apply for the District 6760 Rotary Youth Leadership Awards (RYLA), submit all of the following:

- This completed application
- Copy of student's (or parent's) Health Insurance Card
- Fee payment (paid by the Sponsoring Rotary Club; Payable to 'District 6760 RYLA')
  - \$500 for each participant
- Completed applications must be post marked by April 1st to:

District 6760 RYLA Committee c/o Robert L. Huffman 3925 Sango Road Clarksville, TN 37043

#### **Application Process/Timeline**

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**APPLICATION TO PARTICIPATE IN OUTDOOR** 

## RECREATION ACTIVITIES WAIVER OF LIABILITY AND ASSUMPTION OF RISK

- 1. I, the undersigned, wish to participate in activities at the Fort Campbell Outdoor Recreation program (involving shooting sports, paintball, races and games, team building activities, challenge course programs, obstacle courses, canoeing, kayaking, horseback riding, archery, mountain biking, and other programs). I understand that all outdoor recreational activities involve certain inherent risks. Those risks include, but are not limited to, injury due to slips and falls, to ricochets, weapon malfunction, targets, equipment, and obstacles. In addition, I realize that these risks could result in maiming injury or death. I understand and certify that in order to help reduce those risks, I will follow procedures and use equipment only as instructed by Outdoor Recreation staff.
- 2. Despite these risks, and fully understanding such risks, I wish to participate in outdoor recreation activities and hereby personally assume the risks of participating in these activities. I also hold harmless the U.S. Army, Fort Campbell, the Directorate of Family, Morale, Welfare and Recreation and the Fort Campbell Outdoor Recreation and any of its representatives not responsible for any accidents or thefts while recreating on post.
- 3. I further certify that I am at least 18 years of age or older or that my parent or legal guardian has signed below.
- 4. I, the Parent/Legal Guardian, of any minor participant in the outdoor recreation activities, have read and fully understand the above statement. I hereby assume responsibility of all risks and injuries that may occur while participating in outdoor recreation activities.
- 5. By virtue of my signature, I acknowledge and agree to all terms and conditions. I understand that I am responsible for my own well-being and health while participating in said Outdoor Recreation activity. I accept the health risks associated with said activity and certify that I am of proper health to participate.

Printed Name of Participant	Age
Signature of Participant (if adult)	Date
Parent/Guardian Signature (if minor)	Date_

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#### Things to bring

- A Great Attitude!
- Bed linens (extra-long 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 4 ½ days
- Tennis Shoes / Sneakers (Closed Toe Shoes are Mandatory for many events!)
- Our Academic Room is Air Conditioned (Read as **COLD**) bring a fleece or sweatshirt as necessary.
- Rain Gear and sunscreen. There will be outdoor activities regardless of weather.
- "Award Ceremony Clothes" Pictures will be taken of your award being presented to you. No, it doesn't need to be a coat and tie, just something a little nicer.
- Photo ID
- Water Bottle
- Money All your meals and needs are paid for by your sponsoring Rotary Club and District 6760. You
  only need to bring a small amount of money for vending machines or other incidental expenses, if you
  so desire.
- Cell Phone You may bring a cell phone with you. However, they must be turned off/silenced and put away 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.

#### **Cancelations**

Cancelations on or after April 30<sup>th</sup> will result in no refund of any payment made. Rotary Clubs may choose a replacement, when possible, as determined by the RYLA 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 June 1<sup>st</sup>. If it is NOT possible for the Rotary Club to choose a replacement, as determined by the RYLA committee, the RYLA committee may choose a replacement (possibly from another club) without a refund of the original club's fee payment.

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