



**ROTARY INTERNATIONAL DISTRICT 7530  
ROTARY YOUTH LEADERSHIP AWARDS  
MARCH 26 -28 , 2010  
JACKSON'S MILL STATE 4-H CAMP**

**INSTRUCTIONS FOR PARTICIPANTS**

*Congratulations on being chosen to participate in the 2010 Rotary Youth Leadership Awards.* Your selection to participate in this Conference is an indication that someone has identified you as a person possessing outstanding leadership skills who would benefit from further discussion and instruction on developing those skills. You should be proud of your accomplishments and come to this Conference with an open mind, ready to absorb a great deal of information from community leaders, meet students from around the world, participate in projects with your peers from across West Virginia, and have fun.

Registration will start at 4:00 p.m. on Friday, March 26. Please make certain that you complete the registration forms and return them to your local Rotary Club prior to March 5, 2010.

**NOTE:** We will be holding a talent show on Friday night, March 26. If you have a special talent, please come prepared to share with the other participants and bring any instrument, etc. which you might need. There will be a piano available.

Pack casual clothes, including something that you would wear in the event the weather permits outdoor activities. Also, there will be a dance on Saturday night, so bring something to wear for the dance. Bring a jacket in case of cold weather. Pack all of your personal articles, including soap, shampoo, bath towel, wash cloth and hair dryer (if needed). Jackson's Mill will provide sheets, wool blankets, pillows and cases.

When you register at Jackson's Mill, you will be assigned a room. We will have a separate desk for registration. The Conference will conclude at 10:00 a.m. on Sunday.

If you have any questions, please contact: Dennis M. Shreve, District Chair  
P. O. Drawer 2040  
Clarksburg, WV 26302-2040  
(304-626-1125) Work  
(304-622-3161) Home  
(304-669-9666) Cell  
dmsreve@wvlawyers.com

**DIRECTIONS TO JACKSON'S MILL:**

**FROM NORTH OF WESTON, WV:**

Take I-79S to Exit 105. Follow Route 19S approximately 7 miles to the Hickory House Restaurant . Turn right on Jackson's Mill Road. \* **Follow directions below "FROM JACKSON'S MILL ROAD".**

**FROM SOUTH OF WESTON, WV:**

Take I-79N to Exit 99. Follow Route 33/119W through Weston. Make a right at the 3rd stoplight to Route 19N. Take 19N for approximately 2 miles to the Hickory House Restaurant. Turn left on Jackson's Mill Road.

\* **Follow directions below "FROM JACKSON'S MILL ROAD".**

**\*FROM JACKSON'S MILL ROAD:**

Follow Jackson's Mill Road approximately 2.5 miles to Jackson's Mill. Enter through the 2nd or 3rd gate after the bridge. Go to the Registration Office across from the Dining Hall.



**ROTARY INTERNATIONAL DISTRICT 7530**  
**Rotary Youth Leadership Awards**

**PARENTAL CONSENT, RELEASE AND STATEMENT OF RESPONSIBILITY FOR ROTARY YOUTH LEADERSHIP AWARD-TO BE HELD AT JACKSON'S MILL, WESTON, WV**  
**March 26 - 28, 2010.**

***CONSENT AND RELEASE***

I, as the parent or legal guardian of \_\_\_\_\_, hereby grant permission for him/her to participate in the Rotary Youth Leadership Awards (RYLA) Conference to be held on the dates first mentioned above and for good and sufficient consideration, I hereby release Rotary International and ROTARY INTERNATIONAL DISTRICT 7530 and their officers, directors, members and all participants in said conference of any and all liability and responsibility and shall indemnify and hold them harmless against all claims of every nature and character, including but not limited to injury, loss or damages and for all costs and attorneys fees arising out of and in any way connected with the RYLA Conference.

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

Signatures: \_\_\_\_\_  
Father Mother Guardian

***STATEMENT OF RESPONSIBILITY***

By reason of my being accepted as a participant in the RYLA Conference, I do solemnly declare that I will actively participate in the RYLA Conference as an educational and exchange experience for the benefit of all in attendance and I will not for the duration of the Conference consume any alcoholic beverages, use or carry drugs of any type or kind (excluding prescription medicines), be involved in any immoral act or situation, or create or engage in any disruptive situation and will obey all reasonable requests and rules of Rotary and the Conference.

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

Signature of the RYLA Participant: \_\_\_\_\_

By virtue of my son's/daughter's statement of responsibility above, I agree that Rotary shall have the right to terminate his/her participation in the Conference by causing him/her to return home prematurely, at my expense, upon his/her violation of his/her promise. I further agree to trust the good judgement of Rotary if such a decision needs to be made.

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

Signatures: \_\_\_\_\_  
Father Mother Guardian

**EMERGENCY MEDICAL TREATMENT FORM**

**PARTICIPANT'S NAME (STUDENT):** \_\_\_\_\_

**NICKNAME:** \_\_\_\_\_

**Male**                       **Female**

**PARENTS'/GUARDIAN'S NAME:** \_\_\_\_\_

**HOME STREET ADDRESS:** \_\_\_\_\_

**CITY, STATE, ZIP:** \_\_\_\_\_

**E-MAIL ADDRESS:** \_\_\_\_\_

**TELEPHONE #**                      \_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_  
**Father - Work**                      **Mother - Work**                      **Home**

**Cell Phone #:**                      \_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_  
**Father**                      **Mother**                      **Student**

**IS THE PARTICIPANT ALLERGIC TO ANY MEDICATIONS OR DRUGS?  YES  NO**  
**IF YES, PLEASE EXPLAIN IN DETAIL:** \_\_\_\_\_

**HAS THE PARTICIPANT HAD A TETANUS SHOT?  YES  NO WHEN?**  
**BLOOD TYPE:** \_\_\_\_\_ **FAMILY PHYSICIAN:** \_\_\_\_\_

**INSTRUCTIONS IN THE EVENT OF AN EMERGENCY:** \_\_\_\_\_

**MEDICINES BEING TAKEN:** \_\_\_\_\_  
**SPECIAL INSTRUCTIONS:** \_\_\_\_\_

**INSURANCE COMPANY:** \_\_\_\_\_ **POLICY #** \_\_\_\_\_  
**IDENTIFICATION #** \_\_\_\_\_ **GROUP #** \_\_\_\_\_

**FOR THE PARENT OR GUARDIAN:** I hereby grant permission for the above student identified as the participant to participate in the RYLA Conference March 26 - 28, 2010. In the event of an accident or medical illness, permission is granted for any such medical and/or surgical treatment as may be necessary. Every effort will be made to notify me before any major treatment is undertaken.

**Date:** \_\_\_\_\_

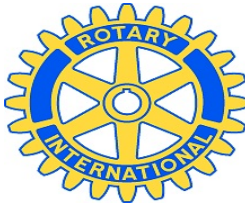
**SIGNATURES:**

\_\_\_\_\_  
**FATHER**

\_\_\_\_\_  
**MOTHER**

\_\_\_\_\_  
**LEGAL GUARDIAN**

**9th Grade Students Only**



**ROTARY INTERNATIONAL DISTRICT 7530**  
**Rotary Youth Leadership Awards**  
March 26 - 28, 2009  
*Jackson's Mill State 4-H Camp*

**REGISTRATION FORM**  
(To Be Completed by Sponsoring Rotary Club)

**Student Name:** \_\_\_\_\_

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

Male  Female

**Telephone #:** \_\_\_\_\_

**Representing:** \_\_\_\_\_  
(school)

**Student Name:** \_\_\_\_\_

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

Male  Female

**Telephone #:** \_\_\_\_\_

**Representing:** \_\_\_\_\_  
(school)

**Student Name:** \_\_\_\_\_

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

Male  Female

**Telephone #:** \_\_\_\_\_

**Representing:** \_\_\_\_\_  
(school)

**Student Name:** \_\_\_\_\_

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

Male  Female

**Telephone #:** \_\_\_\_\_

**Representing:** \_\_\_\_\_  
(school)

Sponsored by the Rotary Club of \_\_\_\_\_

*In sponsoring the students listed above we hereby enclose our check for registrations and expense of the students in the amount of **\$125.00** each, made payable to RYLA. Total enclosed \$\_\_\_\_\_*

Upon the completion of their training we understand the students will be available as speakers for our Club and anticipate using them for a Rotary Program. Return Forms to: Dennis M. Shreve

P.O. Drawer 2040  
Clarksburg, WV 26302-2040

**DEADLINE: MARCH 12, 2010**