



Rotary District 5100  
Rotary Youth Leadership Awards  
Menucha Retreat Center, Corbett, Oregon  
July 9-15 2022

Dear Rotarians,

Thank you for sponsoring a young adult to the Rotary Youth Leadership Awards (RYLA)! Since 1985 Rotary District 5100 has been encouraging young adult leaders in our community by exposing them to incredible speakers, practical skills, and challenges to grow them both individually and as leaders in their communities.

RYLA is a week-long retreat in July of each year. Roughly 35 participants gather in the Columbia Gorge to learn the ideals of Service Above and other leadership skills. To insure the best experience for the participants and the program, we would like you to fill out the following:

**SPONSORING ROTARY CLUB COMPLETES THIS SECTION:**

Rotary Club: \_\_\_\_\_

RYLA Contact: \_\_\_\_\_ Club Position: \_\_\_\_\_

Secondary Contact: \_\_\_\_\_ Club Position: \_\_\_\_\_

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

Email: \_\_\_\_\_ Phone (day): \_\_\_\_\_

Send the completed RYLA application for your club’s candidate(s) **AND** a copy of the applicant’s essays on leadership **AND** the tuition payment of **\$950.00** to the address listed below. **If your club would like to sponsor more than one applicant, please rank your applicants.** To be fair to all clubs involved applicants are generally accepted on a first-come, first-serve basis. However, to encourage district-wide participation clubs are initially limited to two applicants each. Applications will not be considered submitted until payment has been received. The deadline to submit applications to the district is May 31, 2022. Up to 35 applicants may be accepted. Tuition is not refundable due to cancellation after June 14, 2022 and will be prorated based on expenses incurred on cancellations prior to June 12, 2022. **Make checks payable to Rotary District 5100.**

**SPACE IS LIMITED – YOUR PROMPTNESS IS APPRICIATED**

Should your participant drop out last minute, will you allow the RYLA Committee to decide on a replacement?

Yes  No

Return the completed form and your application to:  
**Daniel Spalding, District 5100 RYLA Chair**  
*Daniel@RYLADistrict5100.org*  
2140 SW Wynwood Ave  
Portland, OR 97225

Authorized Rotary Club Signature: \_\_\_\_\_ Date: \_\_\_\_\_



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## APPLICATION

**APPLICANT MUST BE BETWEEN 21 AND 32 YEARS OF AGE ON JULY 9, 2022.**

Name: \_\_\_\_\_ Gender: \_\_\_\_\_  
(Last), (First), (Middle Initial)  
 Preferred Name (for nametag): \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Email Address: \_\_\_\_\_ T-Shirt Size (unisex): \_\_\_\_\_  
 Cell Phone: \_\_\_\_\_ Work Ph.: \_\_\_\_\_ Other Ph.: \_\_\_\_\_  
 Contact Method: \_\_\_\_\_  
 Home Address: \_\_\_\_\_  
 Name of School and/or Business: \_\_\_\_\_  
 Year in school and major and/or Job Title: \_\_\_\_\_

**REFERENCES - List two references who can describe you and your leadership abilities:**

1. Name: \_\_\_\_\_ Phone Contact: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Relationship: \_\_\_\_\_  
 2. Name: \_\_\_\_\_ Phone Contact: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Relationship: \_\_\_\_\_

**PERSONAL HEALTH AND MEDICAL FORM**

Health / Accidental Insurance Company: \_\_\_\_\_  
 Policy Number: \_\_\_\_\_  
 Do you have any special medical condition(s) or allergies? If Yes, please describe:

Do you have special dietary needs or restrictions (including vegetarian, vegan, etc.) if Yes, please describe:

**EMERGENCY CONTACTS-** Close personal contacts that can make medical decisions for you (Who are not attending RYLA). All sections are required.

1. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 Email: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
 Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
 2. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 Email: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
 Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_



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**ANSWER THE FOLLOWING ESSAY QUESTIONS ON A SEPARATE PIECE OF PAPER, WHICH SHOULD BE INCLUDED WITH YOUR APPLICATION.**

1. Define leadership and your leadership abilities and desires. Be as specific as possible.
2. Describe school / work activities in which you are involved and any awards you may have received.
3. Describe other activities with which you are involved (social, civic, religious, etc.) and note your leadership roles.

Applicant Agreement: I understand that to learn in a way that is in accord with the highest aspiration of the program, each of us relinquishes the ability to make certain decisions. As a participant, I understand that I won't choose what I eat, when I have free time, and what activity comes next. I understand these things are decided for me to free up my attention so I can gain the greatest benefit from each day and activity. I understand the most important choice I relinquish is the choice about my term of stay at RYLA. By signing this application, I agree that if selected, I will attend the entire RYLA program for the duration of the RYLA week as listed in this application, and that I will not be able to leave the RYLA campus until the conclusion of the program. **The program begins the morning of July 9, 2022 and ends at 1:00 PM on July 15, 2022.**

I also understand that the program tuition is \$950.00 and that the tuition is being paid by my sponsoring Rotary Club. I agree to reimburse all or part of the \$950.00 tuition to the sponsoring Rotary Club at their request should I leave or cancel any part of my RYLA participation.

I also understand that I am required to contact my sponsoring Rotary club following RYLA to schedule a presentation that shares my RYLA experience with their club's members.

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**Applicant Signature**

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**Date**

Return the completed form and your application to:

**Daniel Spalding, District 5100 RYLA Chair**

*Daniel@RYLADistrict5100.org*

2140 SW Wynwood Ave

Portland, OR 97225

Note: A confirmation is sent to the sponsoring Rotary club after the application, essay, and payment has been received. Acceptance notifications are sent to candidates providing them with further details after the application deadline.