RYLA Rotary District 5020

Vancouver Island, November 6-8, 2026

Cowichan Lake Education Centre located on Lakeview Park Rd,

Registration for RYLA VI – Rotary Youth Leadership Awards Vancouver Island

TO BE COMPLETED BY SPONSORING ROTARY CLUB FOR EACH STUDENT $440 PER APPLLICATION

Sponsored by Rotary Club of_____

Rotarian Contact_____

Telephone_____Email_____

Name:	Name on badge:	Gender
Address:		
Province/State	Postal Code/Zip Code:	
Cell Phone:	Age at start of event:	
Email address:	High School	
Interact Club Member Yes No	T-shirt size:	
Next of Kin:	Email:	
Home phone:	Cell Phone:	

Yes, I want to attend RYLA. I understand that I will be bringing personal belongings and that neither Cowichan Lake Education Centre nor RYLA are responsible for any items lost or stolen while attending this conference.

(Signed/Typed)_____

Family Doctor_____Telephone#_____

(Canadian Students) Provincial Medical Plan Number_____/_____/_____/_____

(USA Students) Medical Plan Carriers Name_____

Plan #_____Telephone #_____

Out of Country Medical Coverage Carriers Name _____

Plan Number_____

Out of Country Medical Plan Carriers Telephone Number _____

Dietary Needs, Allergies, etc.

_____

_____

_____

Medical Conditions_____

_____

Prescription medicines you will have with you_____

_____

Special Assistance or any other information_____

_____

In the event of an emergency, I authorize the above camp staff and/or and/or BC Emergency Services to arrange for emergency transportation and/or emergency medical care.

In Case of Emergency, please notify:

Name_____Number_____

_____ Relation_____

_____ _____ _____

Signature of Participant (typed name) Date

_____ _____ _____

(Signature of Parent/Legal Guardian) Date

*Parent or legal guardian must also sign or type for participants under 18 years of age, *