



## RYPEN Nomination/Registration Form 2021

### Section 1: To be completed by Nominating Rotary Club

The members of the Rotary Club of \_\_\_\_\_ nominate the young person named below to attend the RYPEN Program at the Vertical Horizon Adventure Centre, Inglewood on **March 26<sup>th</sup>- 28<sup>th</sup> 2021**

The fee of \$245.00 for Camp Fees and Course Expenses will be paid by this Rotary Club **when the Inglewood Rotary Club issues an invoice. The following details are essential:**

Club contact: **Print Name** \_\_\_\_\_ **Signed** \_\_\_\_\_  
**Mobile:** \_\_\_\_\_ **Email address print clearly:** \_\_\_\_\_

### Section 2: To be completed by Nominated Student

Nominee's details. Please print clearly.

Full name:			
Known as:			
Gender:	Male <input type="checkbox"/>	Female <input type="checkbox"/>	Age: _____ (must be 15 -17)
Parent/Guardian/Caregiver Name:			
Home address:	_____		
	City/Town	Postcode	
Home Phone No:			
Home email:			
Mobile phone No (parent):			
Mobile phone No (student):			
Student Email; please <b>print very clearly</b>			
School/College			

I agree to abide by RYPEN's protocols and expectations (as per the consent form) and look forward to enjoying a challenging weekend.

Signed (Student) \_\_\_\_\_ Date: \_\_\_\_\_