

Participant Interest Form for RYLA Conference Candidates

Personal Information:

Na	me:
Ge	nder:
Ad	dress:
Cit	y, State, Zip Code:
En	nail Address:
Ph	one Number:
Hi	gh School:
Gr	ade: Freshman Sophomore Junior Senior
Biı	rthdate (month/day/year):
	Why would you like to attend RYLA? List any extracurricular, community service and/or leadership experiences in which you have participated/are currently participating in.
3.	What does leadership mean to you?
4.	Can you fully commit to participating in the 2023 RYLA from 10am Friday, October 4, thru 2:00pm Sunday October 6? Yes No