

1

Click "REGISTER"



RESERVATIONS MAKE A PAYMENT

RYLA Primary Student Registration

REGISTER

Dates: 4/16/2026 - 4/19/2026

Ages: Grades 9th - 12th

Cost: Fees paid by the Club

Availability: This session has openings
Registration will end on 1/30/2026.

2

Click "NEW USER"

New or Returning User

Username / Email:

Password:

LOG IN

NEW USER

[Forgot your login information?](#)

3

Click "required"

Create Account

Account Type

Student / Volunteer / Parent
 Club / RYLA Coordinator

First Name

Last Name 

Primary Phone Cell Phone

Address

City

Country

Complete all required fields to set up your profile.

4

Click "NEXT"

Zip / Postal Code

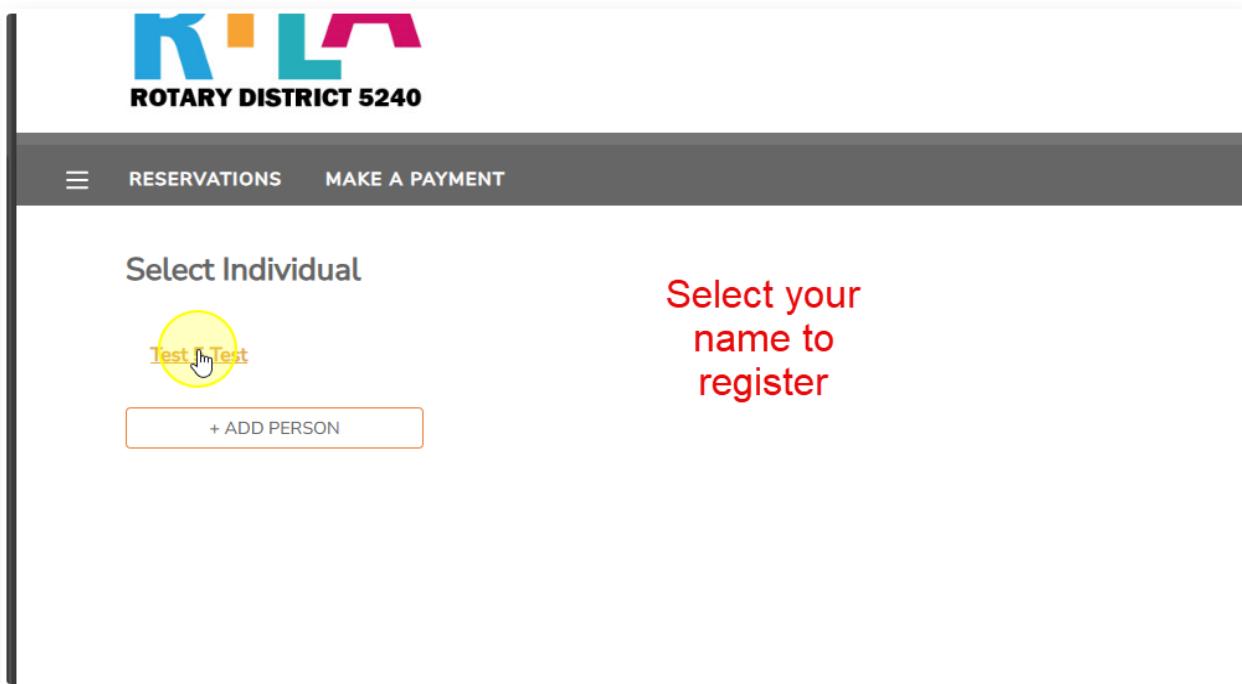
Email 

Password: 

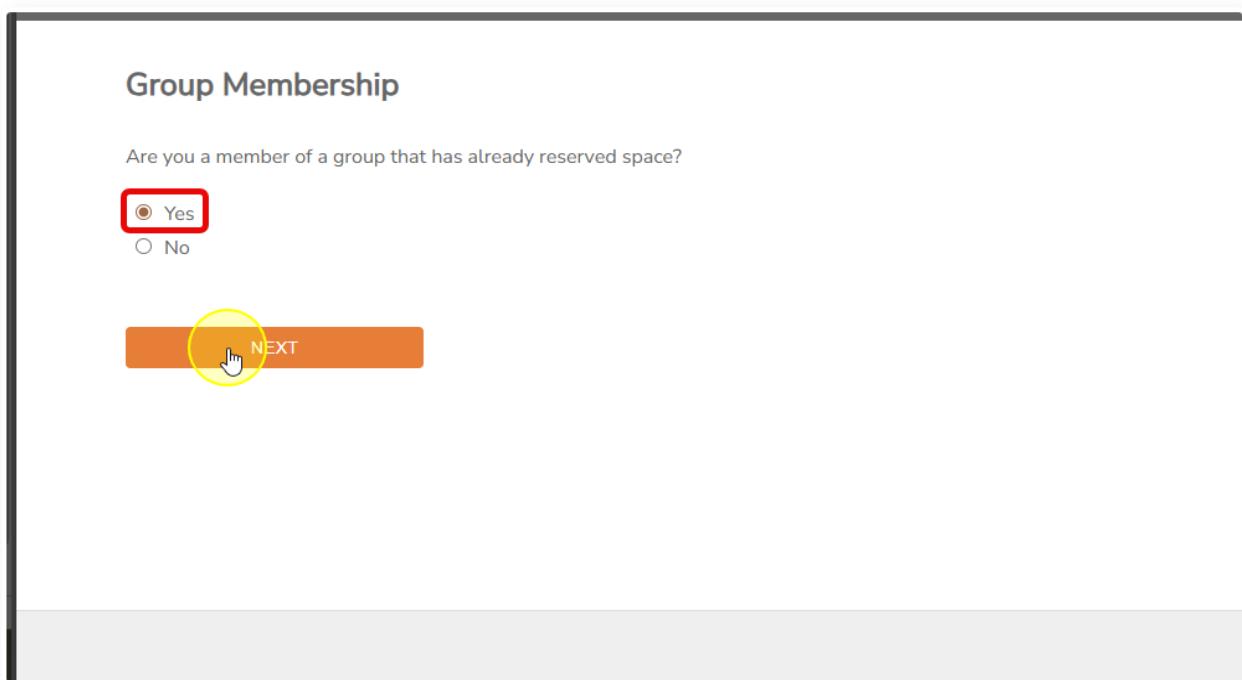
At least 8 characters in length
An uppercase letter
A lowercase letter
A number or special character

NEXT 

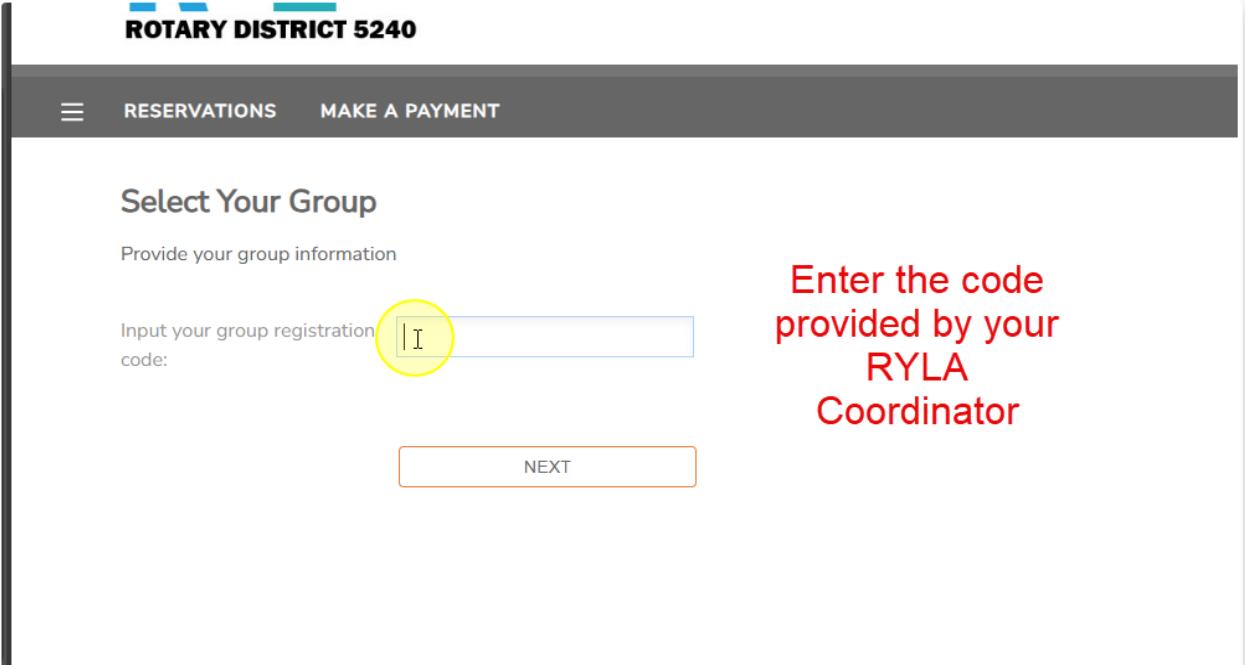
5 Select your name to register



6 Select "Yes" and then Click "NEXT"



7 Click here



ROTARY DISTRICT 5240

RESERVATIONS MAKE A PAYMENT

Select Your Group

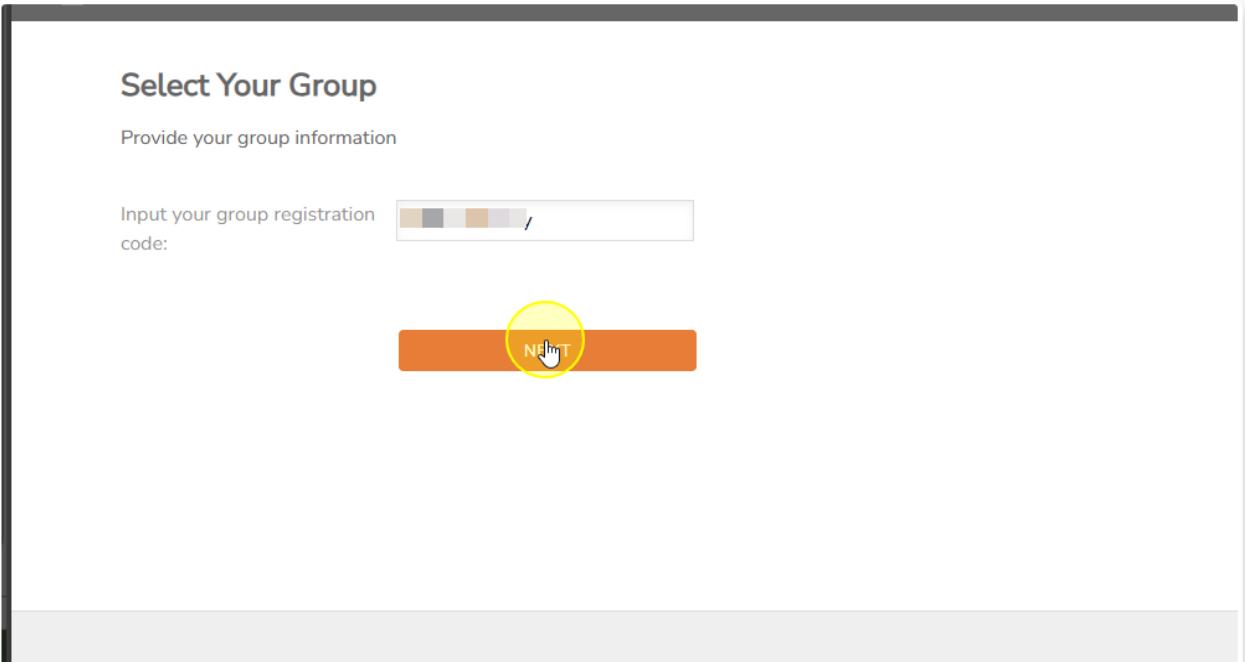
Provide your group information

Input your group registration code:

Enter the code provided by your RYLA Coordinator

NEXT

8 Click "NEXT"



Select Your Group

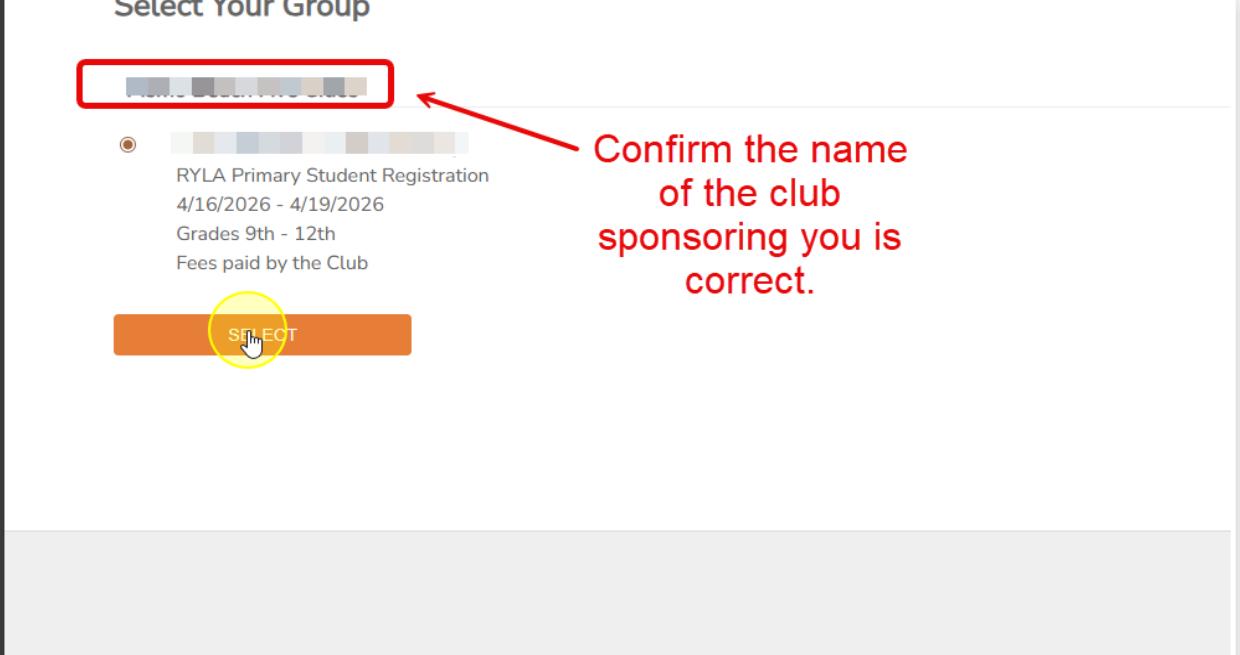
Provide your group information

Input your group registration code:

NEXT

9 Click "SELECT"

Select Your Group



RYLA Primary Student Registration
4/16/2026 - 4/19/2026
Grades 9th - 12th
Fees paid by the Club

SELECT

Confirm the name
of the club
sponsoring you is
correct.

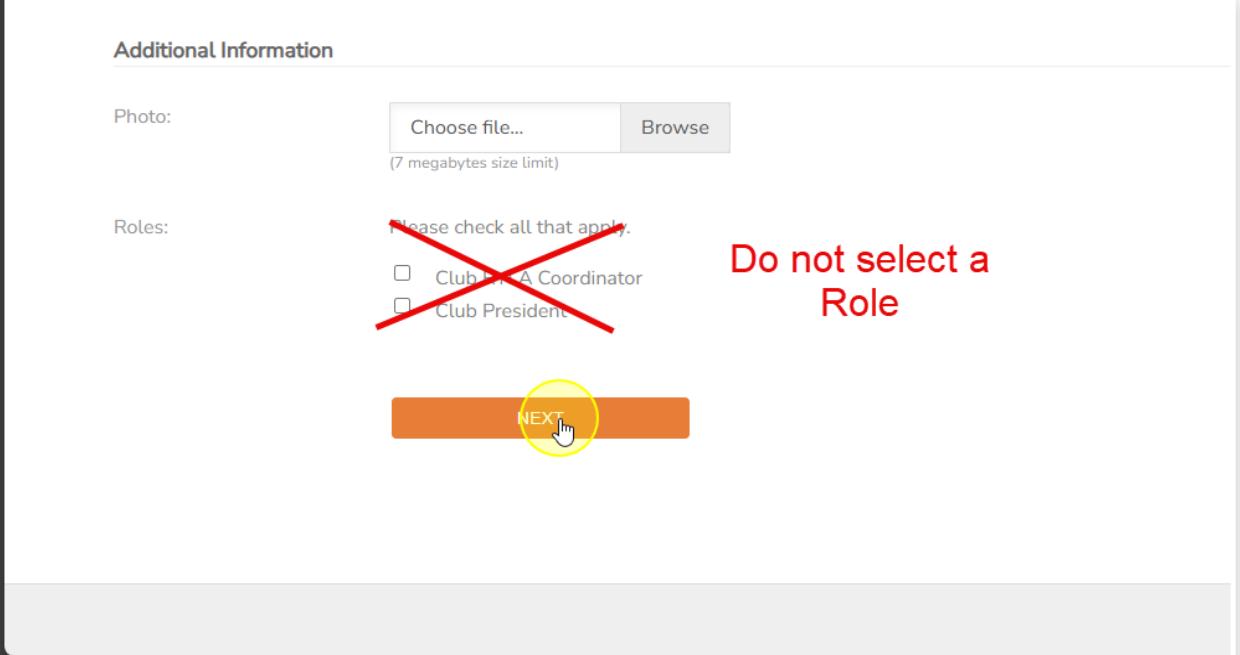
10 Click "NEXT"

Additional Information

Photo: Choose file...
(7 megabytes size limit)

Roles: *Please check all that apply.*

Club Liaison Coordinator
 Club President



Do not select a Role

NEXT

11 Enter information into all required fields



RESERVATIONS MAKE A PAYMENT

Add / Edit Parent/Guardian Contact

First Name:	<input type="text" value="required"/>
Last Name:	<input type="text" value="required"/>
Primary Phone:	<input type="text" value="555-555-5555"/>
Alternate Phone 1:	<input type="text"/>
Email:	<input type="text" value="required"/>

Enter the name of your parent or guardian and all required fields

12 Click "SAVE CONTACT"

Primary Phone:	<input type="text" value="0000000000"/>
Alternate Phone 1:	<input type="text"/>
Email:	<input type="text" value="testdad@testing.org"/>
Relation:	<input type="text" value="Father"/>
Contact Order	<input type="text" value="1"/>

 SAVE CONTACT DELETE

13

Click "NEXT"

Parent/Guardian Contacts

Test, Test Dad 0000000000

+ Add New Contact



14

Select the correct button and then Click "NEXT"

Medication

Yes, Test 5 has medications.
 No, Test 5 does NOT take any medications.
 I do not wish to record medications at this time (they may be added to Test 5 later).

Select the appropriate answer - RYLA must be notified of any medications used



15 Enter High School and other information

ROTARY DISTRICT 5240

☰ RESERVATIONS MAKE A PAYMENT

Registration Information

Please provide the following information.

Name of Highschool

Interact Club Member?
(Required)

Yes
 No

T-shirt Size

Special Talents

16 Enter name of high school and other information

Registration Information

Please provide the following information.

Name of Highschool

Interact Club Member?
(Required)

Yes
 No

T-shirt Size

Special Talents

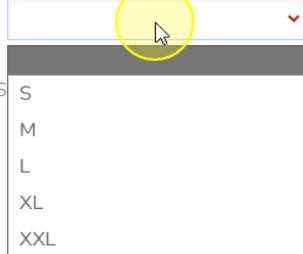
17 Enter Name of High School and other fields

Name of Highschool
Arroyo Grande

Interact Club Member?
(Required)

Yes
 No

T-shirt Size



S
M
L
XL
XXL

College and Career Plans
required

18 Add information in all fields

T-shirt Size
M

Special Talents

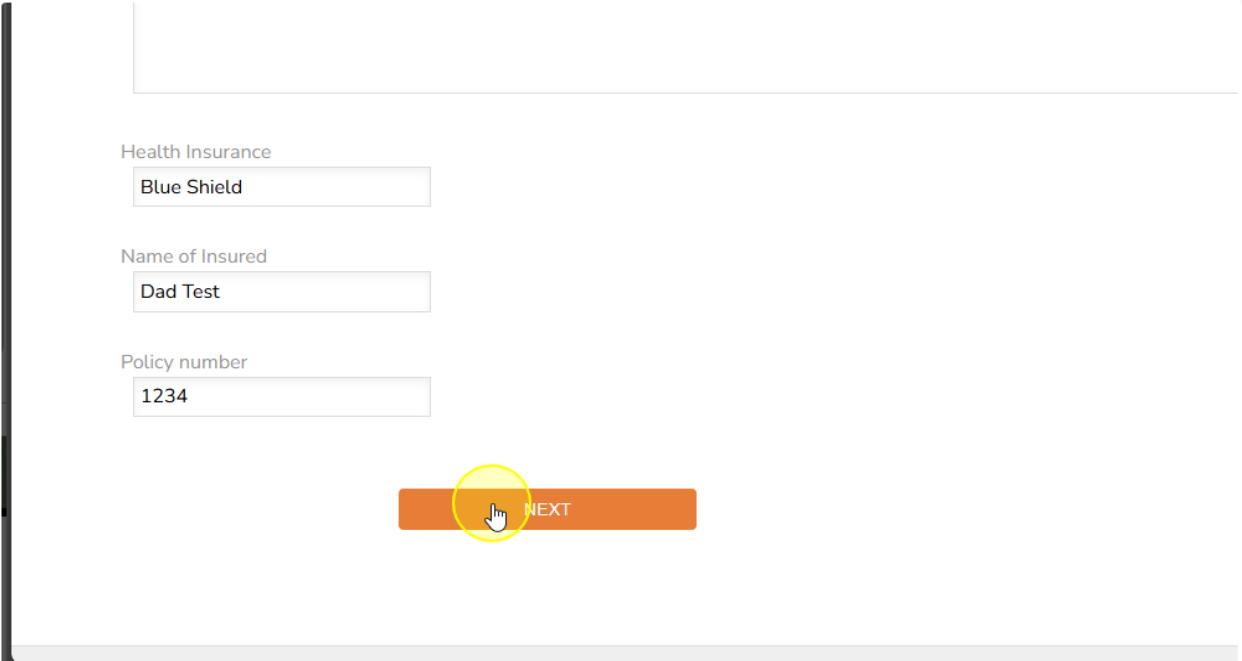
Add information in all fields even if not required. This lets us get to know you better!

College and Career Plans
required

I

List any limitations that may prevent you from participating in any learning or physical activities.

19 Click "NEXT"



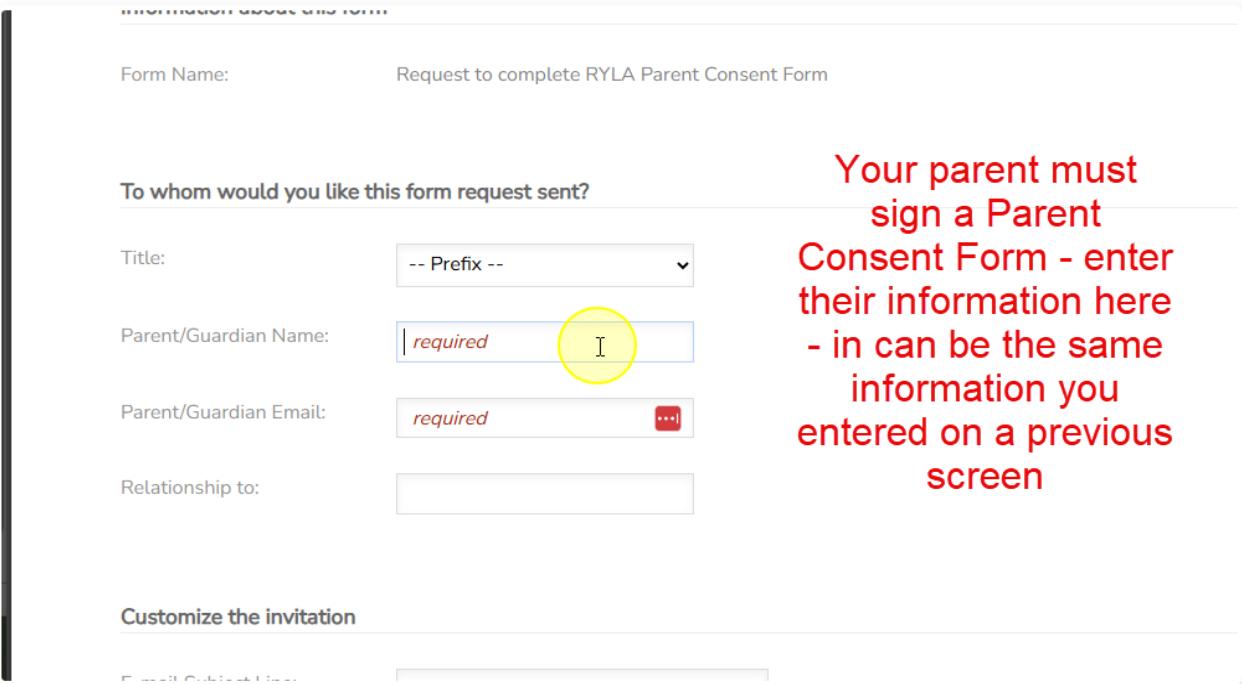
Health Insurance
Blue Shield

Name of Insured
Dad Test

Policy number
1234

NEXT

20 Enter all required fields



Form Name: Request to complete RYLA Parent Consent Form

To whom would you like this form request sent?

Title: -- Prefix --

Parent/Guardian Name: *I* **required**

Parent/Guardian Email: **required**

Relationship to:

Customize the invitation

Your parent must sign a Parent Consent Form - enter their information here - it can be the same information you entered on a previous screen

21 Suggested subject line and text for email to parent

dad test

Parent/Guardian Email: dadtest@testing.org 

Relationship to: Father

Customize the invitation

E-mail Subject Line:  RYLA Parent Consent Form
Default: Request to complete 'Request to complete RYLA Parent Consent Form' on behalf of Test 5 Test

Personal note to invitee:

Hi...

Please review and sign this parent consent form...

22 Click "SEND THIS INVITATION"

Thanks, Test5

What does the form look like?

[View this form](#)

 SEND THIS INVITATION

23

Click "NEXT"

12. Dress for fun and adventure! Leave midriff shirts, short shorts, revealing clothes, and anything promoting alcohol, tobacco,
13. Give the speaker the spotlight – show respect and listen.
14. Eyes open! Spot a problem? Let an adult know.
15. Full sessions required! Be there from start to finish – you'll be glad you did!
16. Stay with your color group to keep the fun (and safety) going!
17. Curfew time means lights out! Be where you belong.
18. Let's keep it safe: no alcohol, tobacco, drugs or weapons of any kind allowed.
19. Go BIG and have a BLAST!

NEXT

24

Click Check Box and then Click to Sign

The information collected below is for **Test 5 Test**.

All students who attend a RYLA retreat are expected to read, understand, and agree to the RYLA Weekend Survival Guide. enforce high standards in behavior and attitude. In addition, it must be understood that all students must be prepared to attend Sponsor now and inform them so a replacement can be arranged.

By check this box, I am confirming that I have read, understood and agree to the RYLA Weekend Survival Guide. I understand that if I do not agree to the terms, I will be responsible for all expenses incurred at the expense of their parents/guardian and/or their sponsoring Rotary Club.

(Required)



agree to the RYLA attendance terms.

Completion Acknowledgement

Signature Required

CLICK TO SIGN

**Click here to finish
registration - you will
need to create a
signature and then
sign the document**

25

Click Complete Registration

