

Dear GenCyber Student Camp Applicant:

This checklist is provided to ensure that all of your forms are completed, signed, and submitted in a timely manner.

Please note that completing the required registration form does not guarantee a seat in the camp. We will notify you/your child of acceptance into the camp via email.

WHAT:	GenCyber STEMworks™ Camp
WHEN:	July 15-19, 2019; 9:00 AM to 4:00 PM
WHERE:	Keaau High School, 16-725 Keaau-Pahoa Rd, Keaau, HI 96749
DEADLINE:	E-mail forms no later than June 21, 2019 (sooner is better!)
E-MAIL SIGNED FORMS TO:	gencyber@hawaii.edu
FORMS:	All forms must be completed prior to attending camp: ☐ Online Student Registration and Questionnaire ☐ Attendance and Transportation Form ☐ GenCyber Code of Conduct Form ☐ Parent/Legal Guardian-Consent, Waiver, Release and Indemnity Agreement Authorization Form and Medical Consent Form

Email – gencyber@hawaii.edu

QUESTIONS:

2019 GenCyber Hawai'i Student Camp Attendance and Transportation Authorization Form

Student Name:		
Parent/Legal Guardian Permission: ☐ My child has my permission to attend t 4:00 PM. There is no cost for attending	he Gen Cyber STEMworks Camp on July 15-19, the GenCyber Camp.	2019; 9:00 AM to
· · · · · · · · · · · · · · · · · · ·	transportation to and from the event each day. I need to be picked up by 4:00 PM each day.	Please do not
Check the box below if you give your child or to Carpool.	permission to exit our campus to catch the Bus	/Public Transportation
· · · · · · · · · · · · · · · · · · ·	GenCyber camp each day to catch the Bus/Pub contact phone:	•
Print Name of Parent/Legal Guardian	Parent/Guardian Signature	Date



2019 GenCyber Hawai'i Student Camp Code of Conduct Form

Good conduct is expected of all participants in the 2019 GenCyber Hawai'i Student Camp. The GenCyber camps are sponsored by the NSA (National Security Agency) and NSF (National Science Foundation). The following rules will apply to all participants and all participants should read and understand each item before camp.

- 1. I will behave in a professional manner at all times and reflect positively on myself, and myschool.
- 2. I will respect the rights of others including belongings, personal space and privacy.
- 3. I will keep my instructor/advisor informed of my whereabouts at all times. During the scheduled classes and events, I will not leave the campus without informing and obtaining approval from my instructor/advisor.
- 4. I will wear my official camp nametag at all times.
- 5. I will be properly attired for all GenCyber sessions and activities, additionally for lab sessions I must wear appropriate footwear.
- 6. I will attend and be on time for all sessions and participate in all activities.
- 7. I will at all times respect all public and private property, including event facilities.
- 8. I will not smoke or chew tobacco or purchase, consume, or be under the influence of alcohol or illegal drugs at any time. I understand that violations are subject to disciplinary action and legal consequences.
- 9. I will only take medication prescribed by a licensed physician. If I am required to take medication, I will have a copy of the prescription with me at all times.
- 10. I will report any accidents, injuries, illnesses, or incidents to my instructor/advisor immediately.
- 11. I know that inappropriate or profane language is not acceptable.
- 12. My conduct shall be exemplary at all times.
- 13. I will leave my valuables at home including excess money.
- 14. If I disregard the rules I will be subject to disciplinary action and will be sent home immediately. My parent or guardian will be responsible for picking me up.
- 15. The following items are prohibited and will be confiscated: E-cigarettes, tobacco products, matches, lighters, weapons.

I have read the above Code of Conduct for the 2019 GenCyber Hawai'i Student Camp and agree to abide by these rules.

Print Name of Student	Student Signature	Date
Print Name of Parent/Legal Guardian	Parent/Guardian Signature	Date
GenCyber Hawai'i Camp Form		Page 3 of 6

PARENT/LEGAL GUARDIAN - CONSENT, WAIVER, RELEASE AND INDEMNITY AGREEMENT AND MEDICAL CONSENT FORM

GenCyber STEMworks Camp

To be completed by parent/legal guardian:

I do hereby grant permission to Maui Economic Development Board, Inc. (MEDB), its agents, and others working under its authority, full and free use of: video/photo-graphs containing my child's image/likeness and my child's GenCyber STEMworks CampProjects. I understand these images/projects may be used for promotional, news, research and/or educational purposes. I hereby release, discharge, and hold harmless MEDB and its agents from any and all claims, demands, or causes of action that I may hereafter have by reason.

Parent/Guardian Initials:	
l do hereby grant permission to Maui Economic Development Boar under its authority, use of my child's information below:	rd, Inc. (MEDB), its agents, and others working
STUDENT INFORMATION Legal Name (First, Middle, & Last)	
Legal Name (First, Middle, & Last)(Legal name as stated on	valid ID like student ID, State ID, etc.)
Name you preferred to be called:	School Grade:
School	
Student Mailing Address	
City, State, Zip	
Parent/Guardian E-mail	
In the case of illness or injury to my child, I hereby consent to and deemed necessary, and agree to pay for such medical and dent My child has medical coverage: No Yes; check appropri HMSA Kaiser Military Other (specify) Emergency Contact 1 Name:	tal costs if incurred. ate box(es):
Ph. #sRelationship:	
Emergency Contact 2 Name:	
Ph. #sRelationship:	
List any health conditions and specify any special medical or other su	uch instructions you would want considered:

I do hereby grant permission to Maui Economic Development Board, Inc. (MEDB), its agents, including its program the funder for GenCyber STEMworks Camp, and others working under its authority, use of survey results from my child and I. I understand the data will be used for only research and/or educational purposes, which includes educational effectiveness and needs for improvement.

uardian Initials:

APPENDIX 7A

l,	_ (child's parent/guardian) further certify that I possess full legal
guardianship to execute the foregoing authoriz	ation and release for
	(child's first and last name).
As parent or guardian of (name of minor child)_ I agree to the terms of this "Information Waive	
Parent's or Guardian's Name (please print)	Parent's or Guardian's Signature
Data	