



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: June 17-21, 2019; 9:00 AM to 4:00 PM
- WHERE: Maui Research and Technology Park, 590 Lipoa Pkwy, Kihei, HI 96753
- DEADLINE: E-mail forms no later than **May 24, 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
- QUESTIONS: Email – gencyber@hawaii.edu

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

Student Name: _____

Parent/Legal Guardian Permission:

- My child has my permission to attend the Gen Cyber STEMworks Camp on June 17-21, 2019; 9:00 AM to 4:00 PM. There is no cost for attending the GenCyber Camp.

Transportation:

Participants are responsible for their own transportation to and from the event each day. Please do not arrive earlier than 9:00 AM. Your child will need to be picked up by 4:00 PM each day.

Check the box below if you give your child permission to exit our campus to catch the Bus/Public Transportation or to Carpool.

- My child has my permission to leave the GenCyber camp each day to catch the Bus/Public Transportation or to Carpool with name: _____ 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 my school.
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
GenCyber Hawai'i Camp Form

Parent/Guardian Signature

Date

**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:

I do hereby grant permission to Maui Economic Development Board, Inc. (MEDB), its agents, and others working under its authority, use of my child's information below:

STUDENT INFORMATION

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 _____

AUTHORIZATION FOR MEDICAL OR DENTAL TREATMENT

In the case of illness or injury to my child, I hereby consent to and authorize such medical or dental treatment as deemed necessary, and agree to pay for **such medical and dental costs if incurred.**

My child has medical coverage: No Yes; check appropriate box(es):

HMSA Kaiser Military Other (specify) _____

Emergency Contact 1 Name: _____

Ph. #s _____ Relationship: _____

Emergency Contact 2 Name: _____

Ph. #s _____ Relationship: _____

List any health conditions and specify any special medical or other such 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.

Parent/Guardian Initials:

I, _____ (child's parent/guardian) further certify that I possess full legal guardianship to execute the foregoing authorization 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 Waiver and Release Form" in respect to my child.

Parent's or Guardian's Name (please print)

Parent's or Guardian's Signature

Date _____