

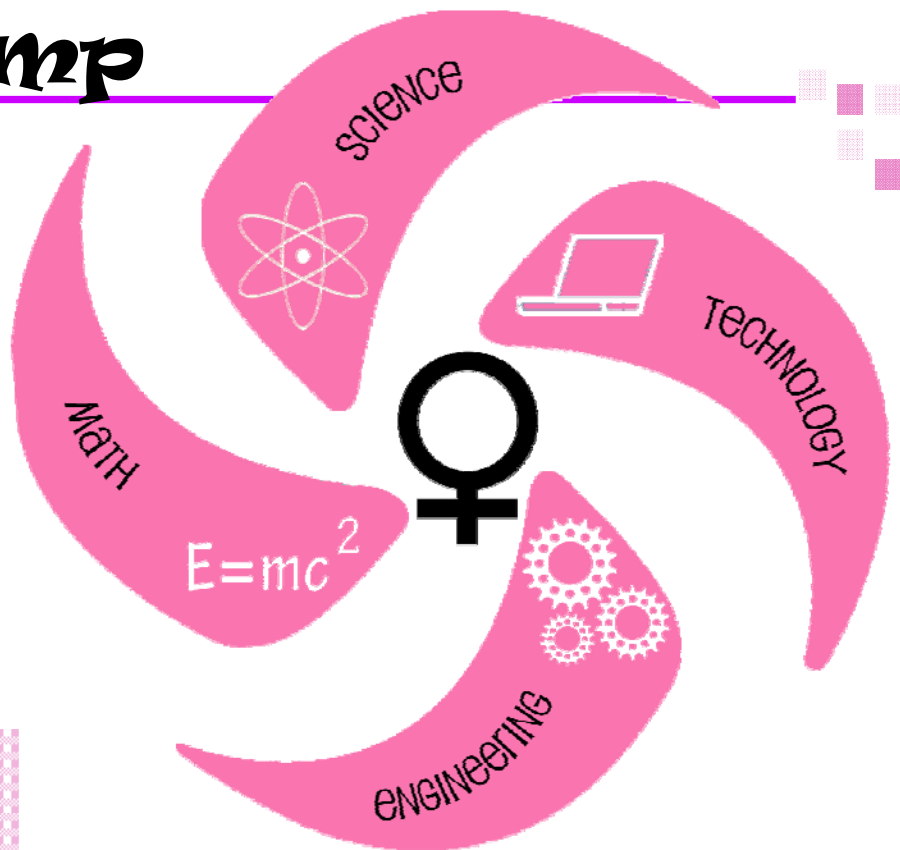
Excite Camp

2010

4-Day Summer Event

June 22 – 25

Tuesday thru Friday
Maui Technology Sites



- ✿ **Learn** about Astronomy, Space, and Science from a Hawaiian Cultural perspective
- ✿ **Visit** an ahupua`a and use geospatial technology to investigate and analyze Hawaiian culture past & present
- ✿ **Explore** a future career in STEM (science, technology, engineering, & math)
- ✿ **Engage** in fun exciting hands-on engineering activities
- ✿ **Tour** one of the fastest supercomputers in the world & many more technology-based companies

***SPACE IS LIMITED!**

Participant selection is **NOT** based on a first come first serve basis

Must be entering 7th or 8th grade in Fall 2010 & able to attend all 4 days to participate

For more information, please visit
www.womenintech.com

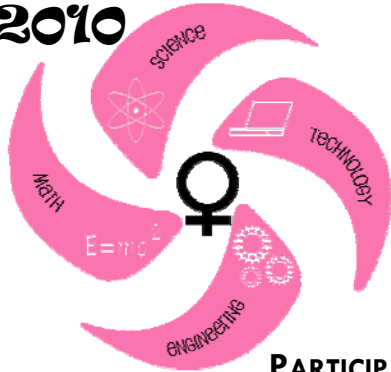
Sponsored by Maui Economic Development Board, Inc., Women in Technology Project, in collaboration with the University of Hawaii – Institute for Astronomy, U.S. Air Force, Maui Research & Technology Park Tenants, and Maui Community College.

Funded in part by the Air Force Research Laboratory and the U.S. Department of Education.

For more information or application form, call (808) 875-2300 or visit <http://www.womenintech.com>

Women in Technology http://twitter.com/WIT_Hawaii

Excite Camp 2010



EXCITE CAMP 2010

FOR INTERMEDIATE SCHOOL GIRLS

Tuesday thru Friday, June 22 - 25

Sponsored by Maui Economic Development Board, Inc. Women in Technology Project, in collaboration with UH-Institute for Astronomy, Maui Research & Technology Park Tenants, and the U.S. Air Force – Detachment 15

PARTICIPATION GUIDELINES

PARTICIPATION ON ALL 4 DAYS IS REQUIRED FOR PROGRAM ACCEPTANCE

SCHEDULE and LOCATION (subject to change without notice):

The Excite Camp program will be held from 8:30 a.m. - 3:15 p.m. on all 4 days at Ke Alahele, The MEDB Center in the Maui Research & Technology Park, 1305 North Holopono Street, Kihei, HI 96753. You are welcome to drop your child off as early as 8:15 a.m.

Parents/guardians are responsible in providing transportation to and from Ke Alahele – The MEDB Center. Please ensure that your child arrives prior to start of program day and is picked up promptly at 3:15 pm.

Day 1 – Tuesday, June 22 – Hands-on Engineering Activities

Day 2 – Wednesday, June 23 – Native Hawaiian Voyaging Presentation & Tour of the Telescopes atop Haleakala

Day 3 – Thursday, June 24 – Maui Research and Technology Park Site Visit to Tech Companies

Day 4 – Friday, June 25 – Ahupua`a Site Visit - use GIS/GPS to Investigate/Analyze Hawaiian Culture Past & Present

STUDENT REGISTRATION AND PARENT AUTHORIZATION FORMS REQUIRED TO PARTICIPATE:

All students are required to complete the “Student Registration Form”, please follow directions.

Parent(s)/Guardian(s) must complete and sign the “Parent Authorization Form”. **Return both forms no later than Monday, May 24.** Send Forms to: MEDB, Attn: Jeni, 1305 North Holopono Street, Ste. 1, Kihei, HI 96753 or fax to (808) 879-0011. To be eligible for this event, students must be able to participate on **all 4 days**. Space is limited. A selection team will decide on participation status and your family will be contacted by June 3.

PARTICIPANTS MUST BE AN INTERMEDIATE SCHOOL GIRL (ENTERING 7TH OR 8TH GRADE), A U.S. CITIZEN TO PARTICIPATE. YOU MUST HAVE A PICTURE ID WITH YOU ON ALL 4 DAYS AS IT IS REQUIRED TO VISIT SEVERAL SECURE FACILITIES. ANYONE WHO DOES NOT MEET THE ABOVE REQUIREMENTS WILL NOT BE CONSIDERED FOR PARTICIPATION.

PROHIBITED ITEMS:

The following items are prohibited and will be confiscated for the day from students who bring them: recording devices (other than cameras), compact CD players, radios, walkmans, Discmans, computers, MP3 players, cell phones, pagers, tobacco products, matches, lighters, weapons. Cameras are not permitted inside the Maui Space Surveillance Complex buildings, please surrender them upon entering.

LUNCH:

Lunch will be provided all four days of the Excite Camp. Participants are allowed to bring their own snacks and drinks. **Anyone with special dietary needs must bring their own lunch.**

CLOTHING REQUIREMENTS:

All Days – capris or jeans (no skirts or shorts), closed toe shoes (preferably sneakers), light jacket.

Day 2 – Haleakala – Everyone must wear long pants (jeans) and closed-toe shoes (sneakers). Visitors must also bring a warm jacket and/or sweater. Students will be walking between facilities. **Please be prepared for cold and/or rainy weather. It can be 30° or colder there!**

Please keep this form for your future reference.



Excite Camp 2010

Presented by the Maui Economic Development Board, Inc., Women in Technology Project

STUDENT REGISTRATION FORM



Students, please *clearly* complete application form in its entirety. Blank fields will not be accepted. Completed registration and parent authorization forms are due on **May 24, 2010**. To be eligible for this event, you must be able to participate on all 4 days. Space is limited. A selection team will decide on your participation status and you and your family will be contacted by June 3.

Legal Name (first, middle, last) _____
(Legal name as stated on valid ID like student ID, State ID, etc.)

School _____ What grade will you be in Fall 2010? 7 8

How did you or your parent hear about Excite Camp: Direct Mailing E-Mail Website Friend

Teacher Guidance Counselor Other: _____

Have you participated in Excite Camp in the past? No Yes (please note priority is given to those who have not participated in past events)

Have you participated in any science, technology, engineering, or math events or competitions in the past?

No Yes, please list events: _____

Why are you interested in participating in Excite Camp 2010 (80 word minimum, 1 paragraph, use back of page if needed)?

Favorite school subjects: _____

Favorite outside school interests: _____

What do you want to be (profession) when you grow up and why? _____

What do you hope to gain from this experience? _____

This event will expose students to a wide variety of experiences and information, some of which may be more valuable to you than others. Below is a checklist of what you can expect to learn during the Excite Camp 2010 event. Rank each item 1 to 5 based on what you feel is most important to you, with 5 being the most important.

	Least important		Most Important		
a.) Meet other girls with interests similar to mine	1	2	3	4	5
b.) Have fun	1	2	3	4	5
c.) Learn more about science, technology, and engineering	1	2	3	4	5
d.) Make new friends	1	2	3	4	5
e.) Explore some new career ideas for myself	1	2	3	4	5
f.) Design and build things	1	2	3	4	5
g.) Have something to do	1	2	3	4	5
h.) Learn about astronomy & space from a Hawaiian Cultural perspective	1	2	3	4	5

EXCITE CAMP 2010

FOR INTERMEDIATE SCHOOL GIRLS

Must be entering 7th or 8th grade in School Year 2010-2011

June 21 - 25, 2010

PARENT AUTHORIZATION FORM

COMPLETE AND RETURN BY May 24, 2010, Fax to 808-879-0011 or mail to: MEDB, Attn: Jeni, 1305 North Holopono Street, Suite 1, Kihei, HI 96753

Legal Name of Student (as it appears on birth certificate/legal ID) _____

Please list another name your daughter goes by that she prefers? _____

Participation on all 4 days is required for program acceptance. Will your daughter be able to commit to all 4 days? No Yes

Is Student a U.S. Citizen? No Yes Student's Place of Birth _____ Student's Date of Birth _____

Does Student have a valid ID (required, state & school ID ok)? No Yes Student's T-shirt Size (Adult sizes only): XS S M L XL

Home Address _____ City, State, Zip _____

Mailing Address _____ City, State, Zip _____

Will you or an authorized driver be able to drop off / pick up your daughter at the designated times and location on all 4 days? No Yes

Drop off @ 8:15 a.m. | Pick up @ 3:15 p.m. **Ke Alahele - The MEDB Center**, Maui Research & Technology Park, 1305 North Holopono Street, Kihei

Best way to get a hold of a parent/guardian to notify if your child has been selected to participate:

Parent/Guardian Name & Phone #: _____ Times to call: _____

Ethnicity Background (*Check all that apply*)

- | | | | |
|---|-----------------------------------|---|---------------------------------------|
| <input type="checkbox"/> African-American | <input type="checkbox"/> Hawaiian | <input type="checkbox"/> Native American Indian | <input type="checkbox"/> Tongan |
| <input type="checkbox"/> Caucasian | <input type="checkbox"/> Hispanic | <input type="checkbox"/> Portuguese | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Chinese | <input type="checkbox"/> Japanese | <input type="checkbox"/> Puerto Rican | _____ |
| <input type="checkbox"/> Filipino | <input type="checkbox"/> Korean | <input type="checkbox"/> Samoan | _____ |

Destinations: Maui Space Surveillance Complex, Haleakala Summit; and Maui Research and Technology Park, Kihei. Buses will take participants to the Maui Space Surveillance Complex at Haleakala Summit.

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: _____

We will be visiting several telescopes atop Haleakala, which is 10,000 feet above sea level and requires some walking between facilities. Does your daughter experience motion sickness, respiratory ailments, or any other illnesses that may prohibit her from traveling at that elevation? No Yes, list any health conditions and specify any special medical or other such instructions you would want considered:

AUTHORIZATION TO PARTICIPATE IN ACTIVITIES OF EXCITE CAMP 2010

I hereby grant permission for my child named above to participate in Excite Camp 2010 from June 22 - 25, and to travel by car, bus, and other means of transportation to and from planned event activities. I release and hold harmless the Maui Economic Development Board, Inc., Maui Research & Technology Park tenants, Maui Community College, University of Hawaii-Institute for Astronomy, and the Maui Space Surveillance Complex, their officers, agents and employees, for any injury or death suffered by my child while participating in the planned activities.

MINOR PHOTOGRAPHY RELEASE

In consideration of the engagement as a model of the minor named above and upon the terms hereinafter stated, I hereby grant Maui Economic Development Board and its legal representatives and assigns, and those acting with its authority and permission, the absolute right and permission to take, copyright and use, reuse, publish, and republish photographic portraits or pictures of the minor or in which the minor may be included, in whole or in part or composite in character or form, without restriction as to changes or alterations from time to time, in conjunction with the minor's own or a fictitious name, or reproductions thereof in color or otherwise, made through any medium, and in any end all media now or hereafter known for illustration, promotion, art, editorial, advertising, trade, or any other purpose whatsoever. I also consent to the use of any published matter in conjunction therewith.

I hereby waive any right that I or the minor may have to inspect or approve the finished product or products or the advertising copy of printed matter that may be used in connection therewith or the use to which it may be applied.

UNIVERSITY OF HAWAII-INSTITUTE FOR ASTRONOMY AND MAUI SPACE SURVEILLANCE COMPLEX TOUR - RELEASE AND WAIVER OF LIABILITY

I hereby agree on behalf of my child (the term "child" refers to any child, stepchild, adopted child, or child or minor person you have guardianship over) to hold harmless, and to release and forever discharge the University of Hawaii, the Institute for Astronomy, the U.S. Government, the Department of Defense, the United States Air Force, and all of its officers, agents, employees, successors and assigns acting officially or otherwise, from any and all claims, actions, or causes of action, on account of any loss or damage to property, personal injury or death, whenever they may arise, including aggravation of any preexisting condition, suffered by my child, whatever the cause, including those damages, injuries, or deaths resulting from any defect or any error, act, or omission of any Air Force agent, officer, employee, volunteer, or third persons.

This hold harmless agreement covers, but is not limited to, any property damage, personal injury, or death occurring during or as a result of my child's participation in the University of Hawaii-Institute for Astronomy and Maui Space Surveillance Complex (MSSC) Tour.

I also agree that I and all those I am binding to the terms of this agreement will fully indemnify the University of Hawaii and United States Air Force for any property damage, personal injury, or death which my child may cause through negligence, willful misconduct or deliberate unauthorized use of any equipment or property belonging to the United States government including all court costs and reasonable attorney's fees. Further, I agree that I and all those I am binding to the terms of this agreement will fully indemnify the University of Hawaii and the United States Air Force for any and all costs associated with any medical treatment and/or emergency response that my child may need as a result of my child's personal injury or death associated with my child's participation in the tour of the UH-Institute for Astronomy and MSSC Tour. The right of indemnification shall inure to the benefit of all successors in interest and assigns of the University of Hawaii and U.S. Government and the corresponding burden shall rest with any successors or assigns of mine and all those parties subject to this agreement, whether now known to me or as yet unascertained.

I am entering into this agreement knowingly, voluntarily, and without duress or inducement. I am at least 18 years of age, and I am competent to bind myself and my child and everyone subject to this agreement to its terms, and I suffer from no legal disability.

Print or type Parent's/Guardian's Name _____

Parent's/Guardian's Signature _____

Date _____