

- Learn about Astronomy, Space, and Science from a Hawaiian Cultural perspective
- S 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 largest DOD telescope in the world & see the stars from Haleakala

Applications due: June 20, 2014

*SPACE IS LIMITED!

Participant selection is NOT based on a first come first serve basis Must be entering 7th or 8th grade in Fall 2014 & able to attend all 4 days to participate.

For more information, please visit

www.womenintech.com

or contact Mapu at 875.2343 or mapu@medb.org



PRESENTED BY THE 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.



EXCITE CAMP 2014

FOR INTERMEDIATE SCHOOL GIRLS Tuesday thru Friday, July 8 to 11

the U.S. Air Force - Detachment 15

Sponsored by Maui Economic Development Board, Inc. Women in Technology Project, in collaboration with UH-Institute for Astronomy, Maui Research & Technology Park Tenants, and

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 at Ke Alahele, The MEDB Center in the Maui Research & Technology Park, 1305 North Holopono Street, Kihei, HI 96753 on all 4 days. 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 by 3:00 pm.

- Day 1 Tuesday, July 8, 8:30 am to 3:00 pm Getting to know each other and Identifying yourself
- Day 2 Wednesday, July 9, 8:30 am to 3:00 pm Analyze the scientific method via hands on activities
- Day 3 Thursday, July 10 8:30 am to 12:00 Midnight Native Hawaiian Voyaging Presentation, Hawaiian Night Sky, Tour of the Telescopes and Star Party up top Haleakala

Day 4 – Friday, July 11 – 8:30 am to 3:00 pm – Technology all around us and Movie Presentations. Parents are invited to join us from 2:00 pm to 3:00 pm to watch our Excite Camp movie which the girls will be producing.

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 Friday, June 20. Send Forms to: MEDB, Attn: Mapu, 1305 North Holopono Street, Ste. 1, Kihei, HI 96753 or fax to (808) 879-0011. To be eligible for this event, students must a US Citizen, be able to participate on all 4 days, an intermediate school girl entering 7th or 8th grade and have a valid ID. Space is limited. Acceptance letters will go out on Wednesday, June 25.

PROHIBITED ITEMS:

The following items are prohibited and will be confiscated for the day from students who bring them: recording devices (other than cameras), computers, MP3 players, tobacco products, matches, lighters, weapons. Cell phones are permitted only before or after the program.

LUNCH:

Lunch, snacks and water will be provided all four days of the Excite Camp. Dinner will be provided on July 10. Participants are allowed to bring their own snacks and drinks. **Anyone with special dietary needs must bring their own snacks & meals.**

CLOTHING REQUIREMENTS:

- Day 1 Capri's/Jeans, closed-toe shoes (sneakers/crocs) and light jacket.
- Day 2 Capri's/Jeans, closed-toe shoes (sneakers/crocs) and light jacket
- Day 3 Capris/Jeans, closed-toe shoes (sneakers/crocs) and light jacket during the day.

 Afternoon/evening Jeans, layered clothing, warm jacket and/or sweater. Students will be walking between facilities and outdoors for the Star Party. Please be prepared for cold and/or rainy weather. It WILL be 30° or colder there!
- Day 4 Capris/Jeans, closed-toe shoes (sneakers/crocs) and light jacket.

Please keep this form for your future reference.



Excite Camp 2014

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

STUDENT REGISTRATION FORM

Students, please *clearly* complete application form in its <u>entirety</u>. Blank fields will not be accepted. Completed registration and parent authorization forms are due on **June 20, 2014**. To be eligible for this event, you must be able to participate on <u>all 4 days</u>. Space is limited. A selection team will decide on your participation status and you and your family will be contacted by June 25, 2014.

Legal Name (first, middle, last)					
(Legal name as stated on valid ID II) Name you preferred to be called:	ike student ID, Sta	te ID, etc.			
School What g	rade will you	be in l	- all 2014	4? □ 7	□ 8
How did you or your parent hear about Excite Camp: □ Direct Mailing					riend
☐ Teacher ☐ Guidance Counselor ☐ Other:					
Have you participated in Excite Camp in the past? No Yes (please not			ho have not	t narticinat	ted in past events)
					ed in pasi evenis,
Have you participated in any science, technology, engineering, or math ever	-		_		
□ No □ Yes, please list events:					
Why are you interested in participating in Excite Camp 2014 (80 word min	<u>nimum</u> , 1 para	agraph	, use bac	k of pa	ge 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 inform than others. Below is a checklist of what you can expect to learn during the based on what you feel is most important to you, with 5 being the most imp	e Excite Camp ortant.	2014	event. Ro	ank eacl	h item 1 to 5
	Least Import	_	_		
a.) Meet other girls with interests similar to mine	1	2	3	4	5
b.) Have fun	!	2	3	4	5
c.) Learn more about science, technology, and engineering	!	2	3	4	5
d.) Make new friends	!	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	I	2	3	4	5

EXCITE CAMP 2014

FOR INTERMEDIATE SCHOOL GIRLS

Must be entering 7th or 8th grade in School Year 2014-2015

July 8-11, 2014

PARENT AUTHORIZATION FORM

COMPLETE AND RETURN BY June 20, 2014, Fax to 808-879-0011 or mail to: MEDB, Attn: Mapu, 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?						
Is Student a U.S. Citizen? ☐ No ☐ Yes Student's Place of Birth	Student's Date of Birth_					
Does Student have a valid ID (<u>required</u> , state & school ID ok)? ☐ No ☐ Y	'es Student's T-shirt Size (Adult sizes only): ☐ XS ☐ S ☐ M ☐ L [□XL				
Mailing Address	City, State, Zip					
Will you or an authorized driver be able to drop off / pick up your daughter Drop off @ 8:15 a.m. Pick up @ 3:00 p.m. Ke Alahele – The MEDB Ce July 10 − Event will end @ 9:00 pm up top Haleakala. Drop off time at Pick up ☐ 11:15 pm Bank of Hawaii, Pukalani ☐ 11:40 pm Maui Marketplace (BOH sid	at the designated times and location on all 4 days? ☐ No ☐ Ye nter, Maui Research & Technology Park, 1305 North Holopono Street, Ko points are estimated times:	es				
Best way to get a hold of a parent/guardian to notify if your child has been	selected to participate:					
Parent/Guardian Name & Phone #s:	Times to call:					
Ethnicity Background (Check all that apply) African-American Hawaiian Native Caucasian Hispanic Portugu Diplomate Japanese Puerto Filipino Korean Samoa	Rican	_ _				
AUTHORIZATION FOR ME	DICAL OR DENTAL TREATMENT					
In the case of illness or injury to my child, I hereby consent to and authorize such medical and dental costs if incurred. My child has medical coverage: No Yes; check appropriate box(es)	<i>,,</i>	. ,				
Emergency Contact 1 Name:P	n. #sRelationship:					
Emergency Contact 2 Name:P	n. #sRelationship:					
We will be visiting several telescopes atop Haleakala, which is 10,000 fee daughter experience motion sickness, respiratory ailments, or any other ill If yes, please list	nesses that may prohibit her from traveling at that elevation? No 🗌 Ye					
List any health conditions and specify any special medical or other s	uch instructions you would want considered:					
AUTHORIZATION TO PARTICIPATE IN ACTIVITIES OF EXCITE CAMP 2014 I hereby grant permission for my child named above to participate in Excite Camp 2014 from July 8-11, 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, 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.						
	TOGRAPHY RELEASE					
In consideration of the engagement as a model of the minor named above and upon representatives and assigns, and those acting with its authority and permission, the aphotographic portraits or pictures of the minor or in which the minor may be included alterations from time to time, in conjunction with the minor's own or a fictitious name, media now or hereafter known for illustration, promotion, art, editorial, advertising, traconjunction therewith.	absolute right and permission to take, copyright and use, reuse, publish, and repub, in whole or in part or composite in character or form, without restriction as to chan or reproductions thereof in color or otherwise, made through any medium, and in a	olish nges or any end all				
I hereby waive any right that I or the minor may have to inspect or approve the finish connection therewith or the use to which it may be applied.	ed product or products or the advertising copy of printed matter that may be used in	n				
I hereby agree on behalf of my child (the term "child" refers to any child, stepchild release and forever discharge the University of Hawaii, the Institute for Astronomy, officers, agents, employees, successors and assigns acting officially or otherwise, property, personal injury or death, whenever they may arise, including aggravati damages, injuries, or deaths resulting from any defect or any error, act, or omission of this hold harmless agreement covers, but is not limited to, any property dama University of Hawaii-Institute for Astronomy and Maui Space Surveillance Complex (I also agree that I and all those I am binding to the terms of this agreement will personal injury, or death which my child may cause through negligence, willful mis States government including all court costs and reasonable attorney's fees. Further University of Hawaii and the United States Air Force for any and all costs associated my child's personal injury or death associated with my child's participation in the tou the benefit of all successors in interest and assigns of the University of Hawaii and mine and all those parties subject to this agreement, whether now known to me or as	from any and all claims, actions, or causes of action, on account of any loss of on of any preexisting condition, suffered by my child, whatever the cause, incloid fany Air Force agent, officer, employee, volunteer, or third persons. ge, personal injury, or death occurring during or as a result of my child's particip MSSC) Tour. fully indemnify the University of Hawaii and United States Air Force for any prope conduct or deliberate unauthorized use of any equipment or property belonging to 1, I agree that I and all those I am binding to the terms of this agreement will fully in d with any medical treatment and/or emergency response that my child may need a or of the UH-Institute for Astronomy and MSSC Tour. The right of indemnification so U.S. Government and the corresponding burden shall rest with any successors of	mless, and to and all of its or damage to cluding those pation in the erty damage, to the United ndemnify the as a result of shall inure to or assigns of				
Print or type Parent's/Guardian's Name	Parent's/Guardian's Signature Date	<u>——</u>				