

2019 Camp Innovation MOANALUA



"Creativity is thinking up new things. Innovation is doing new things."

Theodore Levitt

July 16-20, 2019

Camp Innovation is a 5 day, 4 hour per day experience in which students design, build and test various technology applications including basic coding, and robotics. This year, students will be introduced to Snap and Python programming through programmable **CoDrones**, and their very own take home mini drone. They will also use **VEX Robotics** kits, as tools in solving problems and various challenges

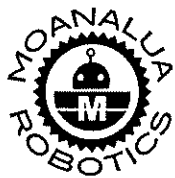


Camp Information:

Dates: Tuesday, July 16th – Saturday, July 20th
Time: 8:00am – 12:00pm
Location: Moanalua Middle School Library
Demo Day: Saturday, July 20th (family and friends welcome)
Eligibility: Students who are currently enrolled in grades 4, 5, 6 or 7
Tuition: \$185 (includes t-shirt and take home mini drone kit)
Deadline: June 16, 2019

Enrollment Information: Enrollment presently being accepted. A penalty fee will be assessed for returned checks. Reservations are confirmed on a first come, first served basis until all spaces are filled; subsequent enrollees will be placed on a waiting list. **No substitutions are allowed.** No new confirmations will be made within 2 weeks of the session start date. Upon receipt of the Enrollment Form and tuition check, applicants will be sent a confirmation email along with additional forms and information applicable to the program. **Enrollment Form and tuition check may be dropped off at Moanalua Middle School front office (1289 Mahiole Street, Honolulu, Hawaii 96819) with checks payable to: Moanalua Middle School.** For further information, please contact David Arakaki at david_arakaki@notes.k12.hi.us or 305-1305

Refund Policy: A cancellation fee of \$75 will be assessed for all registration cancellations if written notice is received three or more weeks before the first day of the session (if less than three weeks, the full tuition will be forfeited). There will be no partial or full refunds due to partial or full non-participation by the student due to illness or injury, voluntary withdrawal, or for any changes in program activities caused by circumstances beyond the control of the Moanalua Middle School Robotics Team.



2019 Camp Innovation – Moanalua Enrollment Form

July 16-20, 2019, 8:00 a.m.-12:00 p.m.



Incomplete applications cannot be processed and will be returned.

Student's Last Name	First	Grade (as of Jan 1, 2019)	4	5	6	7						
Mailing Address					Sex	Male	Female					
City	State		Zip Code									
Home phone number ()		Age					8	9	10	11	12	13
Parent's email address:			School currently attending									
Father's Name			Cell Phone ()									
Mother's Name			Cell Phone ()									

Student T Shirt Size: Adult:	<input type="checkbox"/> X Large	<input type="checkbox"/> Large	<input type="checkbox"/> Medium	<input type="checkbox"/> Small
(check one) Child:	<input type="checkbox"/> Large	<input type="checkbox"/> Medium	<input type="checkbox"/>	<input type="checkbox"/>

In case of emergency (and parents are not available), please contact:

Name	Relationship	Phone
Family Doctor	Phone	
Medical Insurance plan	Membership number	
Name of person who will be picking up student	Phone	

ACCIDENT, MEDICAL, AND MEDIA RELEASE

We, _____ (names of parents or guardians), parents of _____ (name of student), who is attending the Camp Innovation - Moanalua session, release all officers/directors/staff members and teachers of the Moanalua Middle School Robotics Team, Moanalua Middle School, and all other sponsoring agencies and/or organizations and volunteers of any claim for damages, liability, injury, expense, or loss on account of any negligence or other wrong doing that may occur while our child is attending Camp Innovation - Moanalua. We also agree to indemnify and hold harmless those persons of the above stated organizations on any claim arising out the Camp Innovation - Moanalua activities under this agreement. In case of accident or need for medical attention, we give permission to the Camp Innovation - Moanalua staff members to take our child, _____ (name), to a doctor, dentist and/or emergency medical facility. It is understood that the cost for treatment will be borne by the parent or guardian.

We also hereby give permission to the Camp Innovation - Moanalua, Moanalua Middle School, to film, tape, or otherwise record our child's name, voice, and/or person. We understand that these recordings of our child may include news releases to include photographs about Camp Innovation - Moanalua and other media releases to publicize Camp Innovation - Moanalua, and open-circuit (broadcast), closed-circuit, and/or cable television transmission within or outside of the State of Hawai'i in perpetuity. We also understand that there will be no financial or other remuneration for recording our child, either for initial or subsequent transmission or playback. The Camp Innovation - Moanalua, Moanalua Middle School, may also use our child's name, likeness, and/or bibliographical identification for publicizing and promoting the use of these recordings.

Further, we have read and understand the refund policy and enrollment policy stated in the Camp Innovation - Moanalua materials.

_____	_____
FATHER'S OR LEGAL GUARDIAN'S SIGNATURE	DATE
_____	_____
MOTHER'S OR LEGAL GUARDIAN'S SIGNATURE	DATE

Note: both parents or legal guardians listed on form must sign.

Optional parental waiver if you do not wish to sign out students daily:

Camp Innovation - Moanalua ends at 12:00 daily. A parent or another authorized adult must sign out the child daily in the MMS library. If you do not wish to sign out the student daily, please sign the waiver below.

I authorize the Camp Innovation - Moanalua staff to release my child, _____, at 12:00 p.m., Tuesday through Saturday, at Moanalua Middle School (library) without being signed out by a parent or other authorized adult.

PARENT'S NAME	SIGNATURE	DATE

Payment: \$185 tuition must be paid in full and dropped off at Moanalua Middle School or mailed to: David Arakaki, C/O Moanalua Middle School, 1289 Mahiole Street, Honolulu, Hawaii 96819, with a completed enrollment form. Make personal check, money order, or cashier's check payable to MOANALUA MIDDLE SCHOOL.

Received on _____	Check no. _____	Date _____	Total Enclosed _____
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