

HCC Drones for Girls 2025

presented by

**Hillsborough Community College – Brandon Campus
Hillsborough County School District**

HCC Drones for Girls Camp is designed to introduce middle students to the world of Engineering Technology so they can explore the applications of Drones in both the industrial and personal use fields. The camp facilitators are from the Hillsborough Community College Engineering Technology Program, and local industry, all selected based on their experience and training. The camp coordinator is Shirley Dobbins – Engineering Technology instructor at HCC.

The Drones for Girls will be **in person** at the HCC Brandon Campus, 10451 Nancy Watkins Drive, Tampa, FL 33619 in room BSSB 218. Camp hours are **8:30 am – 4:00 pm** and campers must bring their own lunch. The campus cafeteria is not open for service during the summer.

July 28th – August 1st (6th – 10th grade) cost is \$399.

During this exciting program, students will:

- **Fly Real Drones:** Learn to navigate obstacle courses, complete flying challenges, and practice the art of drone piloting.

Visit www.fl-ate.org/projects/camps.html for more information.

Please make checks and money orders payable to Hillsborough Community College (HCC)

Include a COPY of your Driver's License with the Registration Form when paying by Check

Forms and registration fees cannot be dropped off.

Forms and registration fees must be mailed to: **Shirley Dobbins / HCC
10451 Nancy Watkins Drive
Tampa, FL 33619**

All campers will receive a confirmation email once registration forms and fees are processed. If you do not receive a confirmation email from Shirley Dobbins - Camp Coordinator within 2 weeks of application submission, please email Shirley Dobbins at sdobbins@hccfl.edu to inquire about your child's camp status.



For additional information visit: www.fl-ate.org/projects/camps.html or

Shirley Dobbins @ +1 (813) 253-7852 sdobbins@hccfl.edu



Application for the 2025 Drones for Girls

During the camp, students will build the following skills:

- Critical thinking
- Coding
- Creativity and innovation
- Communication and teamwork
- Confidence with cutting-edge technology

Please note, HCC camp staff may not be trained to assist with special need learning styles.



HCC Drones for Girls - Registration Form



Drones for Girls
(Grades 6-10)

July 28th – August 1st (\$399)

8:30 am – 4 pm

Name _____ Gender Male / Female Grade (as of September 2025) _____

Student's Home Address _____

City _____ County _____ Zip Code _____

Is your child a previous HCC camper? Yes _____ No _____

If "yes", what is your camper looking forward to learning and doing this summer:

Each camper gets one free camp shirt. Adult T-Shirt Size: ☐ S ☐ M ☐ L ☐ XL ☐ 2XL

Contact Information

Parent/Guardian(s) _____

E-mail (1) _____ E-mail (2) _____

Parent Phone (1) _____ Phone (2) _____

Emergency Contact's Name _____

Emergency Contact's Phone _____ Relationship _____

HCC PARTICIPANT RELEASE FORM AND PHOTO/VIDEOGRAPHY RELEASE

In consideration of and as a condition for my Child's participation in the HCC Drones for Girls, I agree to the following terms and conditions of this Participant Release and Photo and Videography Release:



1. I, _____, individually and as the parent/guardian of _____, a minor, sign this participant release on behalf of myself and my child/ward. I acknowledge I received and have read the written materials and instructions relating to the HCC Drones for Girls and associated activities, outings, and field trips.
2. I acknowledge that I am the natural parent (guardian) of a child/ward and that I also have legal custody of the child/ward.
3. During this HCC Drones for Girls, campers must ensure that their computers, laptops, tablets, or devices meet the system requirements needed for the virtual camp. As the parent/guardian, I assume all risks for downloading software and apps needed for my child's participation in the HCC Drones for Girls Summer Camps.
4. I agree to release, waive, defend, indemnify, and forever discharge HCC, its Board of Trustees, employees, agents, successors and assigns (the "Released Parties") from any and all claims, or liability for injury including death or damages (including loss or damage to property), claims, costs and expenses (including attorney fees) arising from or attributable to my child's participation in or travel associated with the HCC Drones for Girls, unless it is due to willful fault or gross negligence on the part of HCC.
5. I authorize Hillsborough Community College and their authorized representatives to record my child's likeness and voice in any medium; to use my child's name in connection with these recordings; and to use, reproduce, produce, exhibit or distribute in any medium these recordings for any purpose that HCC deem appropriate, including promotional or advertising efforts without compensation. I release HCC from liability for any violation of any personal or proprietary right in connection with use by HCC. I understand that all such recordings, in whatever medium, shall remain the property of HCC. I have read and understand the terms of this release.
6. I acknowledge and agree that this Agreement is intended to be as broad and inclusive as permitted by law. If any provision is determined to be unenforceable, the remaining terms of the Agreement shall remain in full force.
7. I acknowledge and agree that this Agreement shall be interpreted in accordance with the laws of the state of Florida and that any dispute arising shall be filed in a court of competent jurisdiction in Hillsborough County, Florida.
8. I acknowledge that I have read this Release, that I have executed voluntarily, and that this release shall be binding upon myself, my child and their heirs, executors, administrators, and representatives in the event of death or incapacity.

I AM OF AT LEAST 18 YEARS OF AGE AND HAVE READ AND UNDERSTAND THIS RELEASE AND ACCEPT AND AGREE TO ITS TERMS.

Signature of Parent/Guardian: _____

Date: _____

Print Name of Parent/Guardian: _____

HILLSBOROUGH COMMUNITY COLLEGE CODE OF CONDUCT

AGREEMENT for DRONES FOR GIRLS



[To be COMPLETED BY CAMPER AND PARENT/GUARDIAN]

This statement, when signed by both camper and parent, serves as an Agreement with Hillsborough Community College (HCC).

Due to the nature of HCC programs, all participants are always expected to act in a responsible and courteous manner. During camp, HCC staff will review examples of acceptable and unacceptable behavior. Participants are expected to adhere to the guidelines set forth by HCC staff. If a behavior problem arises, HCC staff will first discuss the problem with the individual. If the problem continues, the participant may forfeit participation in future program activities. If the problems are severe, the parent/guardian will be contacted to discuss the problem. Finally, if the problem is not rectified, the participant will be asked to leave the virtual classroom and a refund will not be issued.

Examples of behavior that may result in a participant leaving a program include, but are not limited to, consumption or possession of alcohol; use or possession of tobacco products or illegal narcotics; possession of a weapon; destruction of property; inappropriate language during meetings, and stealing of parts and pieces of the robots.

Participant: I have read and understand the above statement. By signing this Agreement, I agree to act in a responsible and courteous manner at all times. If I do not follow the guidelines set forth by staff, I understand that I may forfeit my participation in the program activities.

Print Participant's Name: _____

Signature of Participant: _____

Date: _____

Parent/Guardian: I have read and understand the above statement. By signing this statement, I agree to arrange and pay for transportation if my child must leave the program early.

Print Name of Parent/Guardian: _____

Signature of Parent/Guardian: _____

Date: _____

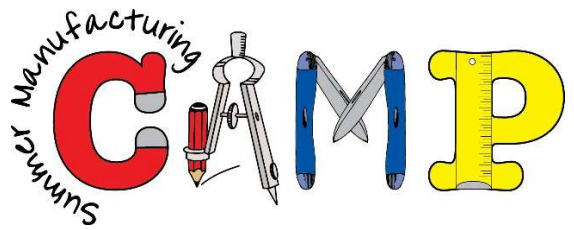


PHOTO RELEASE FOR SUMMER MANUFACTURING CAMP PARTICIPANTS

I hereby authorize Spark Force, its affiliates, successors and assigns (collectively the "Company"), the right to take, utilize and/or publish (i) photographic, digital or video images of myself and/or the minor child or children listed below, (ii) our names and likenesses, (iii) artwork produced by my child during the camp, and (iv) comments submitted as a result of my child's camp experience (collectively the "Images and Statements") for use in the Company's print, online and video-based marketing materials, as well as the other Company publications listed below.

I hereby release, discharge, and agree to hold harmless the Company, its directors, officers, employees, and agents from any liability, whether intentional or otherwise, that may occur or be produced in the development of any media created and used by the Company, as well as the publication of such media, including without limitation any claims for libel or violation of any right of publicity or privacy or copyright infringement claims. I hereby waive any right that I may have to inspect or approve any finished copy, photograph, or other media that may be developed and used by the Company. I further waive any right to royalties or other compensation arising or related to the use of the Images and Statements.

I attest that I am the parent or legal guardian of the child or children listed below and that I have full authority to consent and authorize the Company to use the Images and Statements.

Authorized Publications: Any of the magazines published by the Fabricators & Manufacturers Association (FMA) and its publishing company FMA Communications, as well as the websites of those organizations and the Spark Force (FMA foundation). In addition, the quarterly newsletters of Spark Force and the social media channels maintained and managed by the aforementioned organizations.

Camp Location (School) _____ Date _

Attendee Name(s) _

Parent/Guardian Signature _

Print Parent/Guardian Name _

HCC Drones for Girls

Camp and Health Information Form & Release For Medical Treatment Form

Campers may not begin program activities until the below form is completed, signed and on file with Hillsborough Community College (HCC).

Any changes to information on these forms must be provided to HCC staff on arrival to camp.

I, _____ (Print), parent/guardian of
_____ (Print participant name) permit my child to participate in the
HCC Drones for Girls at HCC.

HCC Drones for Girls is held at the HCC Brandon located at 10451 Nancy Watkins Drive in Tampa in the Student Services Building – Room 218, on Monday through Friday from 8:30 a.m. to 4 p.m. Drop-off and pick-up times are 8:30 a.m.-4 p.m. (SHARP).

I understand the program is coordinated by HCC Staff, Hillsborough County School District Educators, HCC Faculty, and HCC Students.

HCC Drones for Girls do not include meals. Each child is responsible for bringing his/her lunch and snacks. Refrigeration will NOT be provided and NO microwave heating of food is allowed due to safety issues.

I have reviewed and understand the activities for the HCC Drones for Girls.

Please read the following carefully to eliminate any mistakes relative to the drop-off/pick-up of your child.

The names listed on the registration form include people who have my permission to drop off and pick up my child. Any other names must be given to camp staff in writing prior to pick-up.

1. Campers must be signed in and signed out of camp by an authorized adult. If you must pick your child up at any time other than the normal dismissal time, you must report directly to the Program Coordinator for an "Early Release" form with a photo ID, before contacting your child. The instructor will assist you with getting your child out of the activity.
2. The camps are conducted from 8:30 a.m. – 4 p.m. Child supervision will NOT be available before 8:30a.m. or after 4 p.m. for students. HCC will not assume responsibility for children outside of this time frame. HCC is not responsible for minors authorized to leave class without adult supervision.
3. HCC Staff cannot administer any medications to your child including any over-the-counter medications.

4. Participant Health Insurance Information:

Child/Ward is covered by family medical/hospital insurance?

Yes

No

If so, indicate carrier or plan name _____
Group Number _____ Name of Insured _____
Policy Holder ID Number _____ Name of Family _____
Physician _____ Telephone Number of Family _____
Physician _____ Name of Family Dentist/Orthodontist _____
Telephone Number of Family Dentist/Orthodontist _____

5. Does the camper have any allergies (including food, nuts, insect stings, hay fever, asthma, penicillin, or other drugs, etc.); diseases (hepatitis, measles, heart disease/defect, epilepsy, diabetes, etc.); dietary restrictions or other conditions (migraines, nosebleeds, behavioral, etc.) that camp staffers need to be aware of:

Explain _____

6. Consent and Release for Medical Treatment.

I, _____, the **parent/guardian** of _____, a minor, sign this consent and release on behalf of, myself and my child. In consideration of my child/ward's attendance and participation at the HCC Drones for Girls and all associated activities and outings (collectively called "the Camp"), I execute this Consent and Release for Medical Treatment (the "Consent") with HCC, and any related and affiliated entity including HCC's Board, officers, employees, agents, insurers, successors and assigns. I understand and agree that this Consent and Release shall be binding on me, my child/ward, as well as the representatives, executors, heirs, next of kin, administrators, beneficiaries, successors and assigns of my child/ward.

I hereby authorize a licensed physician, emergency medical technician, paramedics, nurses, hospital or other medical or health care facility or provider ("Medical Provider") to provide medical care to my child/ward for any illness, injury, and/or condition that occurs, manifests, or arises while my child is at Camp. I further authorize any such Medical Provider to perform all procedures, or services deemed medically advisable to treat, or relieve, to attempt to treat, or relieve, any illness, injury, and/or condition. I acknowledge that there is a risk of complications and unforeseen consequences in any medical treatment, and **I knowingly and voluntarily agree to assume any such risk** for and on behalf of myself and my child/ward. I acknowledge that there is a risk of complications and unforeseen consequences in any medical treatment, and **I knowingly and voluntarily agree to assume any such risk** for and on behalf of myself and my child/ward. I acknowledge that no warranty is being made as to the result of any medical treatment. I agree that any health history provided by me, or my child/ward is correct to the best of my knowledge. I have knowledge and experience with the health and capabilities of my child/ward. I certify that my child/ward is in good health and does not have any health, or mental/physical impairments, or conditions that would be aggravated by attendance, or participation at the camp, or that make such attendance, or participation unsafe, or otherwise inappropriate for my child. A copy of this Consent may be used in place of the original.

I acknowledge and agree that this Consent and Release for Medical Treatment is intended to be as broad and inclusive as permitted by law. If any provision is invalidated, or unenforceable, the remaining terms shall be affected, but shall be valid and enforceable to the fullest extent permitted by law. The invalid provision shall automatically be replaced by a substitute provision which is valid and as nearly as possible maintains the same purpose and intention of the invalidated, or unenforceable provision. I acknowledge and agree that this consent and release shall be interpreted in accordance with the laws of the state of Florida.

As a participant, I recognize that my child's participation, involvement and/or attendance at an HCC Camp event or activity ("Activity") is voluntary and may result in personal injury (including death) and/or property damage. By attending, observing or participating in the Activity, I acknowledge and assume all risks and dangers associated with my child's participation and/or attendance at the Activity, and I agree that: HCC and the released parties are not responsible for any personal injury (including death), property damage, or other loss suffered as a result of my child's participation in, attendance at, and/or observation of the Activity, regardless if any such injuries or losses are caused by the negligence of any of the Released Parties (collectively, the "Released Claims"). By attending and/or participating in the activity, I agree I have given a full release of liability to the released parties to the fullest extent permitted by law.

I HAVE READ AND UNDERSTAND THE FOREGOING AND ACCEPT AND AGREE TO ITS TERMS.

Signature of Parent/Guardian: _____

Date: _____

Print Name of Parent/Guardian: _____

Print Name of Child /Ward: _____