

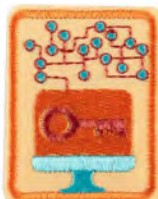
Senior Cybersecurity

Badge 1, 2 & 3 Workshop



February 22, 2020—10:00-4:00 PM

Frederick, MD Library Location



Cybersecurity Basics Badge 1

If you want to stop hackers from stealing information or disrupting other people's computers, you need to know about how computers and computer programs work. Learn how computer programmers write code and set up systems to slow down or stop hackers.



Cybersecurity Safeguards Badge 2

Mobile devices, such as your phone, tablet, or laptop, help you to stay connected no matter where you are. But when you're out and about, your digital information is more vulnerable. Learn how to keep your information and electronics safe when you're away from home.



Cybersecurity Investigator Badge 3

Cybersecurity investigators are detectives who solve cybercrimes by using what they know about technology, cybersecurity, and traditional law enforcement techniques. That means they look for clues and piece together information to figure out how a crime was committed. They have to notice small details, but also understand how the different parts of computer systems and programs work together.

Workshop minimum is 12. **Cost for the workshop is \$30.0000 and includes badges, snack and materials for workshop. Please plan to arrive 15 minutes before start time for check-in. We will start promptly. Girls should bring their own refillable water bottles.** Girl Scouts in 9-12 grades are welcome to attend. Please no siblings or others unless registered.

Registration closes on 02/08/2020, no refunds after this date. You can on Rallyhood here or [sign-up here](#) and pay online, sign-up on waitlist and pay via PayPal Invoice online with debit/credit card, or send a check payable to GSCNC for total due with this form along with check to Cybersecurity c/o Kim Kingsford, 808 Blakely Court, Apt. 252, Frederick, MD 21702. Girls are welcome to attend without their troop but must have a permission/health history form. If you have any questions please email troop81378@gmail.com ore kskingsford@gmail.com.

Girl Scouts not present or participating will not receive Badge or materials

All Girls are expected to assist in clean-up after workshop is complete

Leader/Parent Name: _____		E-mail: _____	
Troop Number: _____		School: _____	
If no troop ⇨ Girl Name: _____		Mobile #: _____	
Address: _____		City: _____	State: _____ Zip: _____
#	Girls	X	\$30.00 = _____
# Chaperon		<input type="checkbox"/> Check if signed up online	

Date Received: _____	Amount Received: _____	Check # _____	Acct: _____
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Financial Assistance is available for girls, for more information please access the online sign-up link and a financial assistance form is available for download there, please apply for Financial Assistance before **XXXX**.



Permission Slip with Health History

Program Name: Cybersecurity 1, 2 & 3 Badge Workshop Date: 02.2.2020

Girl's Name _____ Age _____ Grade _____ Birth date ____/____/____

Address _____ Phone _____

City _____ State _____ Zip _____ Email _____

Mother/Guardian _____ Day phone _____

E-mail _____ Evening phone _____ Cell _____

Father/Guardian _____ Day phone _____

E-mail _____ Evening phone _____ Cell _____

School Attending _____ State _____ Grade _____ Troop # _____ Level _____

The registrant's racial background is: (optional)

- ☐ American Indian or Alaskan Native ☐ Asian ☐ Black or African American ☐ White ☐ Other _____
☐ Hawaiian or Pacific Islander (please check one) ☐ Hispanic or Latina ☐ Not Hispanic or Latina

Must have information for emergency contact if parent(s) cannot be reached (please print clearly):

Name/ Relationship: _____ Phone: - _____

Name/ Relationship: _____ Phone: _____

HEALTH HISTORY – All Information provided will be kept confidential

Describe allergies, details of chronic conditions, or health restrictions on additional sheet if needed

Are all immunizations up to date? ____Yes ____No If no, please state reason: _____

Please provide comments where applicable: Medication being taken _____

Special dietary needs/restrictions: _____ Weight of camper for dosage purposes: _____

Specific information including physical, psychiatric or behavioral problems: _____

Insurance company: _____ Policy Number: _____ Group # _____

Family physician: _____ Phone: Day _____ Eve _____

Parent Permission Statement

- ☐ The health history is correct as far as I know, and the person herein described has my permission to engage in all events activities except as noted. If she appears ill, I will not send her.
- ☐ **EMERGENCY AUTHORIZATION:** In the event I cannot be reached in an emergency, I hereby grant permission to the program director to secure proper treatment for my child.
- ☐ The Girl Scouts may use any photo in which my child appears to promote Girl Scouting.

My child may be given: ☐ Aspirin ☐ Benadryl ☐ Ibuprofen ☐ Neosporin ☐ Tylenol ☐ None

Parent/Guardian Signature required:

Signature _____ Date _____

To Register: Send Registration form along with this Permission/Health History form to "Event Name", c/o Kim Kingsford, 808 Blakely Court, Apt. 252, Frederick MD 21702 Registration fee should be paid online or via check and sent with Registration. Online sign- ups are not considered "registered" until payment is received. For questions please contact: troop81378@gmail.com or kskingsford@gmail.com.

Girl Name: _____