**Demographic Form**

**Gender**

* Male
* Female

**Date of Birth**

**\_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_**

dd mm yyyy

**Race (X those with which you identify):**

* American Indian or Alaska Native
* Asian
* Black of African-American
* Native Hawaiian or Other Pacific Islander
* White
* More than one race
* Unknown or not reported

**Ethnicity (X only ONE with which you MOST CLOSELY identify):**

* Hispanic or Latino
* Not Hispanic or Latino
* Unknown or not reported

**Type of Facilitator**

* Parent
* Day Program Leader
* Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_