**County**

We would like to learn about people who attend our activities to help us improve services. Your answers are combined with everyone else’s and cannot be used to identify you. Everyone here today should fill out one of these forms. Thank you for your help!

|  |  |  |  |
| --- | --- | --- | --- |
| **A-Z** | **A-Z** | **01-12** | **01-31** |
|  |  |  |  |  |  |
| First letter of your **first** name | First letter of your **last** name | Birth Month(2 digits) | Birth Day(2 digits) |

1. Age [ ]  18-59 [ ]  60+ [ ]  Prefer not to Respond
2. Sex [ ] Female [ ] Male [ ]  Prefer not to Respond
3. Ethnicity [ ] Hispanic Latino [ ] Not Hispanic Latino

[ ]  Prefer not to Respond

1. Race: *Choose all that apply*

[ ] Am.Indian/ Alaskan Native [ ] Asian

[ ] Black/African American [ ] White

[ ] Native Hawaiian/ Pac. Islander [ ]  Prefer not to Respond