

## Western Addition Beacon Center Adult Registration Form

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Parent/ Guardian of school aged child/ren? Yes No



**Circle all that apply:**

**RACE/ ETHNICITY**

African American, Other: Black \_\_\_\_\_  
 Asian – Cambodian, Asian- Chinese, Asian- Indian  
 Asian- Japanese, Asian- Korean, Asian- Laotian  
 Asian-Thai, Asian-Vietnamese, Asian-Other \_\_\_\_\_  
 Hispanic/ Latino- Central American, Hispano/Latino- Carribean  
 Hispano/Latino- Cuban, Hispano/Latino- Otro: \_\_\_\_\_  
 Hispano/Latino- Mexican/Mexican-American  
 Hispano/Latino- Puertorriqueno, Hispano/Latino- South American

Middle Eastern- Arab, Middle East- Iranian  
 Middle East – Other: \_\_\_\_\_  
 Native American/ American Indian  
 Native Alaskan, Pacific Islander- Gaumanian  
 Pac. Islander- Hawaiian, Pac. Islander- Samoan  
 Pac. Islander- Tongan  
 Pac. Islander –Other: \_\_\_\_\_  
 White- European American, White- Other  
 Multi-Ethnic Other: \_\_\_\_\_  
**Sex** Man, Woman

**Primary Language**

English, Spanish, Cantonese, Japanese  
 Korean, Laotian, Mandarin, Toishanese  
 Vietnamese, Khmer/ Cambodia, Samoan  
 Tagalog, Arabic, Russian, American Sign Language  
 Other: \_\_\_\_\_

**English Fluency**

Fluent, Somewhat, Not Fluent