



Registration: Program Participation Form

Mondays, Wednesdays, Fridays 9am – 3pm at Lake City Community Center

Name: _____ Date of Birth: _____

Phone: _____ Email: _____

Address: _____ City _____ State _____ Zip _____

Emergency Contact: _____ Phone: _____

The following questions are optional and are included in order to better understand who we are serving in the community:

Do you identify as Transgender or Nonbinary? Yes No

Gender: Male Female Nonbinary Other _____

Or how do you describe your gender identity? _____

Sexual Orientation: Heterosexual Homosexual Bisexual Other

Or how do you describe your sexual orientation? _____

Ethnicity (check all that apply):

- African American, African, Black
- Asian American or Asian
- Caucasian or White
- Hispanic or Latino
- Native American or Alaskan Native
- Pacific Islander or Hawaiian Native
- Other: _____

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Do you have a disability or identify as disabled? Yes No

Are you a Veteran of the U.S. Armed Forces? Yes No

Are you an immigrant, refugee or new arrival to the U.S.? Yes No

What is your primary language? English Other: _____

Please estimate your annual income below:

One Person Household:

- \$17,700 or less
- \$17,701 - \$29,500
- \$29,501 - \$44,800
- \$44,801 or more

Two Person Household:

- \$20,250 or less
- \$20,251 - \$33,700
- \$33,701 - \$51,200
- \$51,201 or more

How did you find out about Lake City Seniors activities?

Are there other types of classes or services that you would like to see for older adults?

Do you have a talent or skill you would like to share and/or would like to volunteer in another way? Let us know!

Thank you for being a part of our community!