

**U.S. Adaptive Recreation Center      Participant Information Form      Winter 2018/2019**

Name:	Home Phone:
Address:	Work Phone:
City:	Cell Phone:
State:          Zip:          County:	Cell Phone:
Date of Birth:          Age:	E-mail address:
M/F:          LBGTQ:	Weight:          Height          Shoe Size:

Parent/Guardian Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Physician/Hospital Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Insurance Company: \_\_\_\_\_ Policy #: \_\_\_\_\_

**PARTICIPANT DETAILS**

- Participant Disability (*be specific as to physical or cognitive elements*): \_\_\_\_\_  
 \_\_\_\_\_ Date of onset: \_\_\_\_\_
- Do you use a wheelchair?    Yes    No    If yes, % of time: \_\_\_\_\_    If yes, it is:    Electric    Manual
- What aids, if any, do you use to walk? (ie: walker, cane, crutches, braces, etc.): \_\_\_\_\_
- Do you have seizures?    Yes    No    Type of seizure: \_\_\_\_\_    Date of most recent seizure: \_\_\_\_\_  
 Frequency of seizures: \_\_\_\_\_    Seizure medication (s): \_\_\_\_\_
- Are you currently taking any medications?    Yes    No  
*If yes, please list medications (attach additional page if necessary):* \_\_\_\_\_
- Are you allergic to anything, (i.e. medication, food, etc.)?    Yes    No  
*If yes, please list allergies:* \_\_\_\_\_
- Do you need to limit your activities for any reason?    Yes    No  
*If yes, please explain:* \_\_\_\_\_
- Are you currently under a physician's care for any specific condition(s) we should be aware of, (i.e. your disability, diabetes, heart trouble, spinal stabilization, shunts, asthma, medications, tracheostomy, etc.)?    Yes    No  
*If yes, please explain (attach additional page if necessary):* \_\_\_\_\_
- Have you taken an adaptive ski lesson before?    Yes    No    If yes, when? \_\_\_\_\_    Where? \_\_\_\_\_
- What level trails did you ski?    (circle all that apply)    Beginner    Intermediate    Advanced
- How did you first hear about USARC? \_\_\_\_\_

Military/Veteran Information	Participant Type
List Years/Wars Served: (ex 1999-2004)	<input type="checkbox"/> Service Member Injured Post 2001
Branch:	<input type="checkbox"/> Service Member Injured Pre 2001
Rank:	<input type="checkbox"/> Guest/Family Member
Date of Injury:	<input type="checkbox"/> Veteran Support Staff
Place of Injury:	<input type="checkbox"/> Other _____

# Disabled Sports USA Waiver & Release of Liability, and Media Release Agreement

Disabled Sports USA, and its affiliated Chapters (“Released Parties”) are non-commercial, not for profit activity providers. The purpose of this agreement is to exempt, waive and relieve Released Parties from any and all liability for wrongful death, personal injury, and property damage, including, but not limited to, liability arising from the negligence of Released Parties. “Released Parties” include Disabled Sports USA , United States Adaptive Recreation Center and their representatives, administrators, directors, agents, coaches, employees, and volunteers; other participants, sponsoring agencies, sponsors, and advertisers; and, if applicable, the owners, operators, and lessors of premises on which the activities or events take place.

**In consideration of the undersigned Participant being allowed to participate in any way in Disabled Sports USA and/or United States Adaptive Recreation Center related events and activities, the Undersigned (“Undersigned” means the Participant or the Participant’s parent, legal guardian, or legal representative when the Participant is under the age of 18 or legally incapacitated) agrees and acknowledges as follows:**

**1. Risks of Activity.** Participant will be taking part in activities that can be hazardous and involve the risk of physical injury and/or death. The activities are inherently dangerous and Undersigned fully realizes the dangers of participating in the activities. The dangers and risks of the activities include, but are not limited to the condition of the premises and equipment, and the acts, omissions, representations, carelessness, and negligence of the Released Parties. Recognizing the risks and dangers, the Undersigned voluntarily chooses for Participant to participate in the activities and expressly assumes all risks and dangers of the participation in the activity, whether or not described above, known or unknown, inherent, or otherwise.

**2. Release and Indemnification.** Undersigned (a) unconditionally releases, forever discharges, and agrees not to sue the Released Parties for any claims or causes of action for any liability or loss of any nature, including personal injury, death, and property damage, arising out of or relating to Participant’s participation in the activities, including, but not limited to claims of negligence, breach of warranty, and/or breach of contract the Undersigned may or will have against the Released Parties; and (b) agrees to indemnify, defend, and hold harmless the Released Parties from and against any liability or damage of any kind and from any suits, claims or demands, including legal fees

and expenses whether or not in litigation, arising out of, or related to, Participant’s participation in the activities.

**3. Helmet Use.** Undersigned agrees that Participant shall use a helmet when participating in the following activities: Alpine skiing, cycling, equestrian, ice hockey, outdoor rock climbing, snowboarding, white water kayaking, white water river rafting, and any other activity when directed by Released Parties. Undersigned understands that a helmet is in no way a guarantee of safety and that no helmet can protect the wearer against all foreseeable impacts to the head, and that the activities can expose the Participant to forces that exceed the limits of protection provided by a helmet. Undersigned agrees to assume full responsibility for complying with this paragraph and that Released Parties shall not be liable for any injury or damages resulting from Participant’s failure to use a helmet.

**4. Miscellaneous.** Undersigned agrees (a) Participant will not engage in any activities prohibited by any applicable laws, statutes, regulations and ordinances; (b) this agreement shall be governed by the laws of the State of California and the exclusive jurisdiction and venue for any claim shall be located in the state courts located in San Bernardino County, California; and (c) this agreement shall be binding upon the subrogors, distributors, heirs, next of kin, executors, and personal representatives of the Undersigned.

**I HAVE CAREFULLY READ THIS AGREEMENT AND UNDERSTAND ITS CONTENTS. I AM AWARE THAT I AM RELEASING LEGAL RIGHTS THAT OTHERWISE MAY EXIST.**

<b>Participant’s Signature</b>	<b>Participant's Name (please print clearly)</b>	<b>Date</b>

**FOR PARTICIPANTS UNDER THE AGE OF 18 OR LEGALLY INCAPACITATED**

Undersigned parent, or legal guardian or legal representative acknowledges that he/she is not only signing this Agreement on his/her behalf, but that he/she is also signing on behalf of the minor or legally incapacitated adult and that the minor or the legally incapacitated adult shall be bound by all the terms of this agreement. Additionally, by signing this agreement as the parent, or legal guardian or legal representative of a minor or legally incapacitated adult, the parent, legal guardian or legal representative understands that he/she is also waiving rights on behalf of the minor or legally incapacitated adult that the minor or legally incapacitated adult otherwise may have. The Undersigned parent, or legal guardian or legal representative agrees that, but for the foregoing, the minor or legally incapacitated adult would not be permitted to participate in the activities. If signing as the parent, legal guardian or legal representative of a minor or legally incapacitated Participant, signing adults represent that they are a parent, legal guardian or legal representative of the Participant.

<b>Minor’s DOB</b>	<b>Parent/Legal Guardian or Representative Signature</b>	<b>Parent/Legal Guardian or Representative Name</b>	<b>Relationship</b>	<b>Date</b>

**MEDIA RELEASE FORM**

**MEDIA/PHOTO WAIVER:** Undersigned authorizes and gives full consent to Released Parties to copyright and/or publish for public view any and all photographs, digital recordings, videotapes and/or film in which Participant appears. Undersigned agrees that Released Parties may transfer, use, or cause to be used, these digital recordings, photographs, videotapes, or films for any exhibitions, public displays, publications, commercials, art and advertising purposes, television programs, and internet without limitations or reservations.

<b>Participant’s Signature</b>	<b>Participant's Name (please print clearly)</b>	<b>Date</b>

<b>Parent/Legal Guardian or Representative Signature</b>	<b>Parent/Legal Guardian or Representative Name</b>	<b>Relationship</b>	<b>Date</b>

Guest #:

For Office Use Only

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

**ASSUMPTION OF RISK, RELEASE OF LIABILITY, WAIVER OF CLAIMS, WARNING, AND INDEMNIFICATION AGREEMENT  
 READ CAREFULLY BEFORE SIGNING – THIS LIMITS YOUR LEGAL RIGHTS**

“Activity” or “Activities” means skiing, snowboarding, ski/ride race competitions, ski/ride school classes/clinics/lessons, special events, programs, demonstrations and performances, strength and endurance training, snowmobiling, uphill, road or mountain biking, any other use(s) of the Resort facilities, courses, or equipment, including, but not limited to, the use of terrain parks and features, chairlifts, and other conveyances, buildings and premises, food and beverage and retail locations, vehicles, sidewalks, trails, parking lots, ice skating, climbing wall, zipline, bungee trampoline, hiking, tubing, sledding, tobogganing, and/or any other recreational activity at the Resort.

“Agreement” means this Assumption of Risk, Release of Liability, Waiver of Claims, Warning, and Indemnification Agreement.

“Minor” or “Minor Participant” means the minor participant(s) named below.

“Pass” or “Passes” means Bear Mountain Anytime Pass, Bear + Summit Anytime Pass, Bear + Summit Midweek Pass, Mountain Bike Park Access Pass and/or other pass or ticket product for use at the Resorts.

“Releasers” means all participants signing this Agreement, as well as all participants on behalf of whom any signatory below is signing this Agreement, including without limitation Minor Participant(s). Releasers includes without limitation “you”, “I”, and “me” as used in this Agreement.

“Resort” or “Resorts” means Bear Mountain, Snow Summit Ski Resort, or both.

**I UNDERSTAND AND AGREE THAT THIS AGREEMENT WILL REMAIN IN EFFECT UNTIL REVOKED IN WRITING BY ME OR BY THE RELEASORS AND SIGNED BY AN AUTHORIZED SIGNATORY OF THE RESORT. THIS AGREEMENT CANNOT BE MODIFIED. I UNDERSTAND THAT THIS AGREEMENT WILL APPLY EVERY TIME I OR ANY RELEASOR ENGAGES IN AN ACTIVITY AT THE RESORT WITHOUT REQUIRING ME OR RELEASORS TO SIGN AN ADDITIONAL AGREEMENT FOR EACH DAY, EACH SEASON AND/OR EACH ACTIVITY.**

**I understand and accept that the Activities are HAZARDOUS and involve RISKS OF PHYSICAL INJURY THAT MAY INCLUDE DEATH. By signing below, I expressly agree to accept all dangers and risks associated with the Activities, including those risks that are not expressly listed in this Agreement, and including those risks that are both known and unknown to me, whether or not they are inherent risks of the Activity. RECOGNIZING AND ACCEPTING THE RISKS, I VOLUNTARILY CHOOSE TO TAKE PART IN THE ACTIVITY AND/OR VOLUNTARILY CHOOSE TO ALLOW RELEASORS TO TAKE PART IN THE ACTIVITIES.**

1. I, on my own behalf and on behalf of all Releasers, understand, accept, and agree that the Activities involve numerous risks including, but not limited to, the risks posed by variations in terrain, snow and weather conditions, extreme cold, frostbite, hypothermia, encounters with wildlife, domestic animals, plants and insects, exposure to the elements, lack of shelter, snow immersion, submersion or drowning in ponds or lakes, deep snow conditions, unstable ice and snow (including, but not limited to, slides and avalanches), slick or uneven walking surfaces, changes or variations in terrain, snow conditions, surface and subsurface snow conditions, icy or firm snow, marked and unmarked obstacles, thin snow cover, bare spots, bumps, moguls, stumps, forest growth and debris, falling trees and limbs, erosion control devices, rocks, cliffs, steep terrain, deep snow, rugged mountainous terrain, cliffs, operation of snowmaking equipment which may create blind spots or areas of reduced visibility, structures, acts of other skiers/snowboarders, and other hazards. I also understand the Activities involve risks posed by loss of balance, loss of control, falling, sliding, slipping, jolting, jarring or shaking (including, but not limited to breaks, sprains, strains, bruises, concussion, and other contusions), risks associated with high elevation (including, but not limited to, anxieties, fears associated with heights, vertigo, dizziness, dehydration, and fatigue) collisions with other skiers or snowboarders and collisions with natural and man-made objects (including, but not limited to, terrain park features, trees, rocks, fences, posts, lift towers, snow making and snow grooming equipment, snowmobiles and other over-snow vehicles), carelessness and misjudgments on the part of participants and staff (including, but not limited to, failure to follow company policies and procedures), and use of chairlifts, rope or other tows, and moving carpets which may involve entanglement with equipment, objects, or other skiers/snowboarders, errors in loading/unloading, and equipment malfunction or breakdown. I acknowledge that it is up to me and/or Minor Participant(s) to have the physical dexterity and knowledge to safely load, ride and unload a lift, and that Minor Participant(s) may use lifts without an adult present. **I expressly agree and accept that all of these risks and dangers are necessary to the Activities.**

2. I, on my own behalf and on behalf of all Releasers, understand, affirm, and agree that: (i) I, and all Releasers, have the physical fitness and dexterity and the knowledge required to safely load, ride and unload the chairlifts, rope or other tows, and moving carpets; (ii) falls and collisions occur, and injuries are a common and ordinary occurrence of the Activities; (iii) I, and all Releasers, shall obey all signs, markings and warnings posted at the Resort, and all applicable laws and regulations; (iv) I, and all Releasers, understand that entering or skiing or snowboarding in a “CLOSED” area may be illegal and/or result in revocation of the Pass; (v) skiing or snowboarding off of designated trails (as indicated on a Resort’s trail map), may be more dangerous to me, and all Releasers, than skiing or snowboarding on designated trails; (vi) there are risks involved in decision-making and conduct of other skiers and snowboarders, and Resorts’ employees, involved with an Activity, including, but not limited to, the risks involved with rescue operations and/or medical care conducted or provided by Resort personnel or third parties inside or outside of Resort boundaries, as well as the risks associated with decisions made by Resort personnel to open and/or close terrain; and (vii) snowmobiles, snowmaking and snow-grooming equipment or other vehicles or property, structures or signage may be encountered at any time and that I, and all Releasers, must be alert for and avoid these hazards and risks at all times. Further, I, and all Releasers, accept the responsibility of maintaining deliberate and conscious control at all times while participating in an Activity.

3. If applicable, I agree to read to, or to have Minor Participant or other Releasers read, and to explain to Minor Participant or other Releasers, if necessary, all posted signs, markings, and warnings, including instructions on the use of chairlifts, rope or other tows, and moving carpets.

**4. In consideration for the Resorts issuing the Pass(es) and permitting me and all Releasers to participate in the Activities, and with the knowledge of the risks and dangers involved, I agree on my own behalf and on behalf of all Releasers to: (1) ASSUME ANY AND ALL RISK OF PROPERTY DAMAGE, INJURY OR DEATH to me and all Releasers while engaged in, or as a result of participating in, any Activities; (2) WAIVE, RELEASE, and NOT SUE, MAKE ANY CLAIM OR FILE ANY ACTIONS against SnowSummit, LLC, Alterra Mountain Company, the United States of America Department of Agriculture Forest Service, and any of their respective owners, operators, parents, members, affiliates, subsidiaries, insurance companies, successors in interest, agents, employees, representatives, assignees, officers, directors and shareholders (each a “Released Party” and collectively referred to as “Released Parties”) for any property damage, injury or loss, including death, which arises in whole or in part out of my and/or Minor Participant’s participation in the Activities or use of the Pass, including without limitation those claims based on Released Parties alleged or actual NEGLIGENCE, BREACH OF ANY CONTRACT AND/OR EXPRESS OR IMPLIED WARRANTY; (3) INDEMNIFY, DEFEND AND HOLD THE RELEASED PARTIES HARMLESS from any and all claims, demands, actions, causes of action, losses**

or liabilities whatsoever arising from or related to participation in any of the Activities, and any loss, damage or injury, including death, that may be sustained by me or any of the Releasors, or caused by others or their property by me or to the Releasors, or brought by me or by the Releasors. I agree to pay all costs, including reasonable attorneys' fees and disbursements, incurred by any Released Party in defending an investigation, claim or suit brought on my or any Releasors behalf as a result of my or any Releasor's participation in an Activity. **I understand and agree that by accepting this Agreement on behalf of any person other than myself, I am representing and warranting that I am legally authorized to execute this Agreement as either the parent or legal guardian of that person and/or Minor Participant(s), or that I have been given the express authority and permission from that other person to accept the terms and conditions of this Agreement on each of their behalf, and I further understand that by doing so I am agreeing to PERSONALLY INDEMNIFY, HOLD HARMLESS AND DEFEND the Released Parties from and against any and all claims brought by or on behalf of the Minor Participant(s), or any person on whose behalf I have executed this Agreement, should they refuse to accept or carry out the terms and conditions of this Agreement.** Additionally, I **AGREE** that this Agreement will be immediately admissible into evidence in response to any claim or lawsuit filed by Releasors or on Releasors' behalf.

5. **I AGREE** that if the Released Parties believe that my behavior or conduct is inappropriate or unsafe, they have the right to suspend or revoke my Pass without my having any right of refund or reimbursement.

6. **I AGREE** that the Pass is non-assignable, non-refundable and cannot be transferred to another person or time period beyond the terms of the Pass. There are no exceptions, other than those available if Pass Protection is separately purchased. Use of my Pass by anyone other than me shall constitute fraud and will result in the immediate loss of all related privileges without compensation and may result in criminal prosecution.

7. **I AGREE** that if I travel beyond a resort boundary, I assume all risks associated with backcountry travel, including the risk of avalanches. **I AGREE** that I may be charged for any rescue, if available, beyond a resort boundary.

8. **I AGREE** to read and follow each and every rule stated in Your Responsibility Code, Cross Country Responsibility Code, Freestyle Terrain Users' Responsibilities, and sections 602(r) and 653i of the California Penal Code, as applicable. This Agreement shall apply to and cover any and all damages, and other claims or rights of action, whether known, unknown, speculative or ascertained in the future, and I and all Releasors expressly waive all rights under section 1542 of the Civil Code of the State of California, which provides as follows: "A general release does not extend to claims which the creditor does not know or suspect to exist in his or her favor at the time of executing the release, which if known by him or her must have materially affected his or her settlement with the debtor.

9. **I AGREE** to grant to Resorts and their advertising and promotion agencies the right to use and publish worldwide and in perpetuity, in any and all forms of media now known or hereafter devised, including without limitation online and in social media, without approval or compensation, my image and/or performance captured at the Resorts.

10. In executing this Agreement, I declare under penalty of perjury under the laws of the State of California that I am doing so only for myself, Minor Participant(s) and/or on behalf of persons for whom I have authority to execute. In the event that I execute this Agreement on behalf of another person, and in the event that the other person brings a claim against Released Parties, **I AGREE** to defend, indemnify and hold harmless Released Parties as fully set forth in Paragraph 4 above.

11. This Agreement shall be binding to the fullest extent permitted by law. If any provision of this Agreement is found to be void or unenforceable as a matter of law, it shall be deemed severed from this Agreement, and the remaining terms shall survive and remain in full force and effect. **I REPRESENT AND ACKNOWLEDGE THAT A) I HAVE THE LEGAL CAPACITY TO ENTER INTO THIS AGREEMENT UNDER APPLICABLE LAW; AND B) IF A PARENT, LEGAL GUARDIAN, SPOUSE OR OTHER REPRESENTATIVE, THAT I AM LEGALLY AUTHORIZED TO SIGN AND THAT I AM SIGNING THIS AGREEMENT ON BEHALF OF OTHER RELEASOR(S) NAMED BELOW, AND THAT OTHER RELEASOR(S) WILL BE BOUND BY ALL THE TERMS OF THIS AGREEMENT. I UNDERSTAND AND AGREE THAT IF THIS AGREEMENT IS NOT SIGNED ON BEHALF OF OTHER RELEASOR(S), OTHER RELEASOR(S) SHALL NOT PARTICIPATE IN ANY ACTIVITY USING THE PASS.** This Agreement shall be binding upon my and each Releasor's assignees, subrogors, distributors, heirs, next of kin, executors and personal representatives.

12. In consideration for Releasors participation in the Activities and use of the Pass, I agree on my own behalf and on behalf of all Releasors that, to the fullest extent permitted by law, **ALL** claims arising from or related to participation in the Activities and use of the Pass(es), including for **INJURY TO PERSON OR PROPERTY AND/OR DEATH**, and this Agreement, shall be **GOVERNED BY THE LAWS OF THE STATE OF CALIFORNIA** and that **EXCLUSIVE JURISDICTION** in the United States shall be in the Superior Court of San Bernardino County, State of California. **THIS IS A BINDING AGREEMENT – DO NOT SIGN IT UNLESS YOU AGREE TO BE BOUND BY ITS TERMS.**

**I HAVE CAREFULLY READ THIS AGREEMENT, UNDERSTAND ITS CONTENTS, AND SIGN IT WITH FULL KNOWLEDGE OF ITS SIGNIFICANCE. By clicking "I AGREE" or by signing below, I warrant THAT I HAVE THE AUTHORITY AND EXPRESS CONSENT TO SIGN THIS AGREEMENT ON MY OWN BEHALF AND ON BEHALF OF ALL OTHER RELEASORS NAMED IN THIS AGREEMENT.**

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 201\_\_\_\_

\_\_\_\_\_  
PRINT Participant's Name

\_\_\_\_\_  
Participant's Signature (if 18 or older)

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Participant's date of birth

\_\_\_\_\_  
PRINT Name of PARENT or LEGAL GUARDIAN (if applicable)

\_\_\_\_\_  
Signature of PARENT or LEGAL GUARDIAN

\_\_\_\_\_  
PRINT Name of MINOR PARTICIPANT

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Minor Participant's Date of Birth

\_\_\_\_\_  
PRINT Name of MINOR PARTICIPANT

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Minor Participant's Date of Birth

\_\_\_\_\_  
PRINT Name of MINOR PARTICIPANT

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Minor Participant's Date of Birth

\_\_\_\_\_  
PRINT Name of MINOR PARTICIPANT

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Minor Participant's Date of Birth

## USARC Statistics Questionnaire

To keep our fees low, USARC uses this information to qualify for grants to various philanthropic foundations and organizations. The information you provide is for USARC statistical purposes only and is strictly confidential. The financial information of individuals is never provided to any organization or foundation.

**Participant Name:** \_\_\_\_\_ **Lesson Date:** \_\_\_\_\_

**Group Name (if applicable):** \_\_\_\_\_

**Please answer each of the following questions.**

1. This question helps you determine the size of your household. For this question a household is a group of related or unrelated persons occupying the same house with at least one member being the head of the household. Renters, roomers, or borders cannot be included as household members.

**How many persons are in your household?** \_\_\_\_\_

2. This question asks about your household income. For this question a list of EXTREMELY LOW-INCOME, VERY LOW-INCOME and LOW-INCOME categories are presented below. These figures are calculated by using FY2018 Income Limits Summary from the HUD website for the 5 largest counties USARC serves.

Using the number of persons in your household you listed above, refer to the charts below and locate the **combined gross annual income** of those persons. Place a check mark in **ONE** of the four blanks provided (for example, if your household has 5 persons whose combined gross annual income does not exceed \$31,448, then you would place a check mark in the "EXTREMELY LOW INCOME" blank.)

**EXTREMELY LOW INCOME:** \_\_\_\_\_  
**LOW INCOME:** \_\_\_\_\_

**VERY LOW INCOME:** \_\_\_\_\_  
**ABOVE LOW INCOME:** \_\_\_\_\_

### EXTREMELY LOW INCOME

Number of Persons in Household	Combined Gross Annual Income Does Not Exceed
1	\$ 18,420.00
2	\$ 21,164.00
3	\$ 24,712.00
4	\$ 28,250.00
5	\$ 31,448.00
6	\$ 34,634.00
7	\$ 38,588.00
8	\$ 42,564.00

### VERY LOW INCOME

Number of Persons in Household	Combined Gross Annual Income Does Not Exceed
1	\$ 30,710.00
2	\$ 35,100.00
3	\$ 39,470.00
4	\$ 43,830.00
5	\$ 47,350.00
6	\$ 50,860.00
7	\$ 54,370.00
8	\$ 57,880.00

### LOW INCOME

Number of Persons in Household	Combined Gross Annual Income Does Not Exceed
1	\$ 49,100.00
2	\$ 56,120.00
3	\$ 63,140.00
4	\$ 70,120.00
5	\$ 75,750.00
6	\$ 81,360.00
7	\$ 86,960.00
8	\$ 92,570.00

3. Please check whether you belong to a Female Head of Household: Yes: \_\_\_\_ No: \_\_\_\_

4. Please indicate how you identify yourself by checking only one of the following choices:

Hispanic	Non-Hispanic	
		White
		Black/African American
		Asian
		American Indian/Alaskan Native
		Native Hawaiian/Other Pacific Islander
		Black/African American & White
		Asian & White
		American Indian/Alaskan Native & White
		American Indian/Alaskan Native & Black/African American
		Balance/Other