

Emergency Contact: _____

Relationship: _____ Phone: _____

This information is being requested for potential use in grant application and reporting. Providing this information is completely voluntary.

Racial or Ethnic Group

- American Indian/Alaskan Asian/Pacific Islander Black/African American
- Hispanic/Latino White/Caucasian Other

Gender

- Female Male Non-Binary

Special Skills:

Disclaimer & Signature

Oconee History Museum cannot be held legally responsible for any loss, expense, or claim for injury or damage resulting from my participation in this program.

Signature _____ Date: _____