



<p>Housing Resources, Inc. Online Education Registration</p>
--

Name: _____

Address: _____

City: _____ Zip: _____

Home Phone: _____ Other: _____

Email Address: _____

How did you hear about this workshop?

Race: _____ # in household _____

Household's Annual Income: _____

Gender: ☐ M ☐ F Age: _____ DOB: _____

Highest level of Education: _____

Marital Status: _____

Active in Military: ☐ Yes ☐ No

Current Resident: ☐ Rent ☐ Own ☐ Other