

## North Down Athletic Club Monitoring form

Please return to Hon. Secretary

### National Identity:

What do you consider your national identity to be? (Eg: Northern Irish, British, Irish, Polish etc) .....

### Ethnicity:

Which of the following ethnic groups do you belong to?

White	<input type="checkbox"/>	Black Caribbean	<input type="checkbox"/>
Chinese	<input type="checkbox"/>	Black African	<input type="checkbox"/>
Irish Traveller	<input type="checkbox"/>	Black Other	<input type="checkbox"/>
Indian	<input type="checkbox"/>	Mixed Ethnic Group Please Specify:	.....
Pakistani	<input type="checkbox"/>	Any Other Ethnic Group Please Specify:	
Bangladeshi	<input type="checkbox"/>		

### Community Background:

Please indicate your community background:

I am a member of the Protestant community	<input type="checkbox"/>
I am a member of the Roman Catholic community	<input type="checkbox"/>
I am member of neither the Protestant nor Roman Catholic community	<input type="checkbox"/>

### Disability Monitoring:

Do you consider yourself to have a disability or medical condition:

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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If yes, what is the nature of your disability/medical condition:

Physical Disability	<input type="checkbox"/>	Blind or Partially Sighted	<input type="checkbox"/>
Deaf or Hard of Hearing	<input type="checkbox"/>	Learning Disability	<input type="checkbox"/>
Other (please specify)	.....		
	.....		