

Basic Demography Form

Study ID

Contact Information

First Name

Last Name

Street, City, State, ZIP

Phone number

(Include Area Code)

E-mail

Date of birth

Age (years)

Ethnicity

☐ Hispanic or Latino ☐ NOT Hispanic or Latino ☐ Unknown / Not Reported

Race

- ☐ American Indian/Alaska Native
☐ Asian
☐ Native Hawaiian or Other Pacific Islander
☐ Black or African American
☐ White
☐ More Than One Race
☐ Unknown / Not Reported

Sex

- ☐ Female
☐ Male

Height (cm)

Weight (kilograms)

BMI

General Comments

Comments
