

Participant Registration Sheet

NAME:				
ADDRESS:				
TELEPHONE #:	CELL #:			
EMAIL:				
Male: Female Black W	hite Hispanic	Other (Plea	se Specify)	
What is your current method of banking?				
Bank Institution Credit Union	Name 	Checking ———	Savings ———	Loan
Check Cashing Services Use of Money Orders				
Title for Loans Other (specify)				
What is your major source of income?				
Wages SS/SSDI	Retirement	Self E	mployed	Other
Type of Employment				
Education Farm Worker Fina				
Income range:0-\$5,000 5,000 - \$10),000 10,000 - \$2	5,000 25,00	0 - \$50,000	_ Over \$ 50,000
Do You Own? Rent? Need to	Rehab? Want	to Purchase? Ye	s No	
Please check whichever is applicable: I have never reviewed my credit report I reviewed my report in the last 6 months _		_ Other		
How did you hear about this class? It's important that I learn				
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