Questionnaire

What	is your age?				
0	18-25	0	35-40		o 55 and old
0	25-30	0	45-50		
0	30-35	0	50-55		
Ethnic	ity(or Race): Please specify:				
0 0	Hispanic			0	Native Hawaiian or Other
	American Indian or Alaskan				Pacific Islander
	Native			0	Caucasian or White
	Asian			0	Two or more races
	African American or Black			0	Race unknown
				0	Other (Please specify)
What	is your gender?				
0	Male			0	Transgender
	Female			0	Other
What activit	are your favorite things to do at t ies)	he Li	ghthouse? (I	Please b	pe specific, list all applicable
What		he Li	ghthouse? (I	Please k	oe specific, list all applicable
What activit	are some topics you would like to Thoughts/Mind Tracker Coping with Stress Relaxation Self Esteem Changing Negative Thoughts to Positive Thoughts) see		the Lig	ththouse? Coping with Anger Coping with Anxiety Coping with Depression Healthy Living (Eating and Exercising) How to Make Better Decisions
What activit	are some topics you would like to Thoughts/Mind Tracker Coping with Stress Relaxation Self Esteem Changing Negative Thoughts to Positive Thoughts Suicide Prevention) see		the Lig	chthouse? Coping with Anger Coping with Anxiety Coping with Depression Healthy Living (Eating and Exercising) How to Make Better Decisions Breathing Techniques/Exercise
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