

**Update Contact Information for the NCRAD Family Study**

Thank you for participating in the National Centralized Repository for Alzheimer’s Disease and Related Dementias (NCRAD) Family Study. If you have a change in your contact information, please let us know. We appreciate being able to stay in touch with you!

Please list any changes to your contact information below:

Family #: \_\_\_\_\_ (this is a 5 digit number that will start with a 62)

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOME PHONE #: \_\_\_\_\_

OTHER PHONE #: \_\_\_\_\_

The National Institute of Health, which sponsors many of our studies, requires that we report **ethnicity** and **race** for all study participants. Please mark **ONE** box in the table below. Start by choosing your ethnicity **Hispanic or Latino** or **Not Hispanic or Latino**. Then under either the **Hispanic or Latino** or the **Not Hispanic or Latino** column choose your race from the selections under the heading **Race**. If you have family members with different race and/or ethnicity, please note them as well. You may use the comments section if needed.

	ETHNICITY	
RACE	Hispanic or Latino	Not Hispanic or Latino
American Indian/Alaska Native		

Asian		
Native Hawaiian or Other Pacific Islander		
Black or African American		
White		
More than one race		

Please call 1-800-526-2839 or email: [alzstudy@iu.edu](mailto:alzstudy@iu.edu) if you have any questions. Thank you!