Sample Registration Questions

The following are sample questions that can be used as part of a registration form. Helpful hints for preparing the form are in brackets. This form is based on a compilation provided by the International Disability Alliance (IDA).

**Primary Information Questions**

- First Name (insert text field)
- Family Name (insert text field)
- Email Address (insert text field)

**Recommended Disaggregated Information Questions** (These questions help collect data related to underrepresented groups and participant demographics)

- What is your country of origin (written field or dropdown menu of countries)
- Do you consider yourself to be: (check-box option) (recommended mandatory question)
  - A man
  - A woman
  - Other
  - I prefer not to say

- Do you consider yourself to be: (check-box option) (recommended mandatory question)
  - A person with intellectual disability
  - A person with autism
  - A person with deafblindness
  - A person with psychosocial disability
  - A person who is blind or partially sighted
  - A person with physical impairments
  - A person who is deaf
  - A person who is hard of hearing or has other hearing impairments
  - A person with another disability not yet mentioned
  - A person without disability
  - A family member of a person with disability
  - I prefer not to say

- If you answered 'A person with another disability not yet mentioned', please describe (written field)

- What is your age? (check-box options)
☐ 18 and under
☐ Between 19 and 35
☐ Between 36 and 55
☐ Between 56 and 64
☐ Between 65 and 74
☐ 75 and over
☐ I prefer not to say

➢ Do you identify as an indigenous person and/or a person from an ethnic or racial minority? (check-box option)

☐ Yes
☐ No
☐ I am not sure
☐ I prefer not to say

➢ What type of organisation do you belong to? (check-box option)

☐ Organisation of Persons with Disabilities
☐ Government
☐ United Nations
☐ Non-governmental Organisation
☐ Consultant
☐ For-profit organisation
☐ Other
☐ I do not belong to an organisation
☐ I prefer not to say

If you answered ‘Other’ please describe (written field)

➢ Do you require any reasonable accommodation to ensure your participation in the event? (written field)

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