



# HOME STRETCH WORKSHOP REGISTRATION

Organization: \_\_\_\_\_  
 Workshop location: \_\_\_\_\_ Workshop Date(s): \_\_\_\_\_

**Instructions:** Please fill out as completely as possible. If you need additional space, please feel free to use the back side or make additional copies as necessary.

### Home Buyer

Name: \_\_\_\_\_  
 (Please print) First MI Last  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_  
 Zip: \_\_\_\_\_ County: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_  
 Work Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_

### Co-Buyer

Attending workshop?  Yes  No

Name: \_\_\_\_\_  
 (Please print) First MI Last  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_  
 Zip: \_\_\_\_\_ County: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Relationship to Buyer: \_\_\_\_\_

### Home Buyer (only) please continue:

- How did you hear about this workshop?
 

<input type="checkbox"/> Mailer, Flyer, or Brochure	<input type="checkbox"/> Newspaper ad	<input type="checkbox"/> Agency (which one: _____)
<input type="checkbox"/> Friend or Relative	<input type="checkbox"/> Internet	<input type="checkbox"/> Realtor
<input type="checkbox"/> Someone who took a workshop	<input type="checkbox"/> Lender / Mortgage company	<input type="checkbox"/> other: _____
- Your ethnicity:  Hispanic, Latino, or Spanish  Non-Hispanic
- Race: (Select one)
 

<input type="checkbox"/> American Indian / Alaskan Native	<input type="checkbox"/> American Indian / Alaskan Native & White
<input type="checkbox"/> Asian	<input type="checkbox"/> American Indian / Alaskan Native & Black
<input type="checkbox"/> Black or African American	<input type="checkbox"/> Asian & White
<input type="checkbox"/> Native Hawaiian or Other Pacific Islander	<input type="checkbox"/> Black or African American & White
<input type="checkbox"/> White	<input type="checkbox"/> Native Hawaiian/Other Pacific Islander & Black
<input type="checkbox"/> Other race: _____	
- How many people will live in the house? \_\_\_\_\_
- Your gender:  Male  Female

**Information about home buyer (Continued):**

6. Your age: \_\_\_\_\_

7. Are you disabled?  Yes  No

8. Are you a single parent household?  Yes  No

9. Please check the highest education level you completed:

- Some High School       Some college or trade school       Bachelors degree  
 High School / GED       Associates / 2 year degree       Graduate or professional degree

10. Marital Status:  Single  Married  Divorced  Widow

11. Household Income: Please include income for all individuals from all sources (*work, disability, child support, etc.*)

Name (person receiving income)	Source of Income	Net Monthly Amount (after taxes)
		\$
		\$
		\$
		\$

12. Current housing:  Rent  Own  Staying with family / friends

13. Are you a first time home buyer?  Yes  No  
 (You have not owned a home for the past three years.)

14. Are you a first generation home buyer?  Yes  No  
 (Your parents did not own a home.)

15. How many dependent children will live in the house? \_\_\_\_\_

16. Current household rent \$\_\_\_\_\_ / month

17. Have you applied for a mortgage loan or signed a purchase agreement?  Yes  No

18. Have you experienced a home foreclosure within the past 3 years?  Yes  No

**If you answered yes to question 17, please complete the purchase property information for your new home:**

Purchase property address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Purchase price: \$ \_\_\_\_\_

Loan amount: \$\_\_\_\_\_ Loan interest rate: \_\_\_\_\_ % Closing date: \_\_\_\_\_

Lender (Bank/Mortgage Co.): \_\_\_\_\_ Loan program (FHA, RD, etc): \_\_\_\_\_

**Disclosure Statement**

While you may learn about the advantages/disadvantages of specific loan products during the Home Stretch workshop, you are free to choose lenders, loan products and homes of your own choosing regardless of the recommendations made by educators. By signing below, you acknowledge that you have received and read this disclosure notice.

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**Homebuyer Signature**

**Date**

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**Co-Buyer**

**Date**

**Authorization to Release Information**

This workshop is funded in part by the Homeownership Education Counseling and Training (HECAT) Fund. The agency providing this workshop plans to share information on this form with the HECAT funders. The HECAT funders include: Minnesota Housing, Minnesota Home Ownership Center, Greater Minnesota Housing Fund, and the Family Housing Fund. The Minnesota Home Ownership Center (Center) is responsible for all aspects of reporting for the HECAT fund. The funders will use the information for program review, research and oversight purposes.

*The Center will follow strict rules to protect your confidentiality.* You will never be named in any reports. Although your responses may be looked at individually by the Center, or contractors hired by the Center to collect and analyze the data, your name will not be associated with any analysis of the data provided on this form. Only group results will be reported, no individual results will be shared. Failure to provide an authorization will not have any adverse impact on services provided. By signing below, you authorize the release of information contained on this form.

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**Homebuyer Signature**

**Date**

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**Co-Buyer Signature**

**Date**