



**Boxing Scotland Limited**  
**Getting to Know You Better**  
**Equality Monitoring Form - Adults**

We want to make boxing as rewarding as we can for you. This means making sure Boxing Scotland can plan for the future as far as possible making sure that the sport is accessible to everyone who wants to take part. It's also vital that we work as hard as we can to eliminate anything that might prevent people from participating fully especially inequality or any kind of negative discrimination or unfair treatment.

To help us do this we would like to know more about you. This information allows us to shape Boxing Scotland to meet the needs of our members but also helps us to remove any barriers that might exist which deter others from participating fully and getting the best possible experience from what the sport has to offer.

It will also be extremely helpful to us in representing Boxing Scotland to others and attracting investment and funding to grow the sport.

Please complete our "Getting to know you" equality survey. The information you give will be treated in complete confidence.

**Consent**

Please tick to confirm your consent for us to collect your personal data in line with the Data Protection Act (DPA) 2018 and General Data Protection Regulations (GDPR) 2018. The information will only be used for the purposes stated above & the form destroyed after it has been collated.

I have read and understood the covering letter which outlines the reasons for collecting my personal information and how this information will be treated	Please tick:	Please write in the date:
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**Your Role**

Please indicate how you are involved in your sport by ticking one of the boxes below:

Member or Boxer	
Staff (paid)	
Staff (unpaid)	
Coach	
Official	
Club Committee	

I would prefer not to answer this question	
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**Age**

Please indicate your age by ticking one of the boxes below

18 – 24		45 – 54	
24 – 34		55 – 64	

35 – 44		65 – 74	
75+			

I would prefer not to answer this question	
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**Sex and Gender Identity**

Please indicate your sex by ticking one of the boxes below:

Male	
Female	
I identify in another way	

I would prefer not to answer this question	
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Do you identify as transgender?

Yes	
No	

I would prefer not to answer this question	
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**Sexual Orientation**

Please indicate which of the following best describes how you think about yourself by ticking one of the boxes below:

Gay	
Lesbian	
Bi-sexual	
Heterosexual	
Other	

I would prefer not to answer this question	
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**Disability**

Do you consider yourself to have a disability?

Yes	
No	

I would prefer not to answer this question	
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Please identify the nature of your disability:

Deafness or partial hearing loss	
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Blindness or partial sight loss	
Learning disability	
Learning difficulty	
Developmental disorder	
Physical disability	
Mental health condition	
Long term illness, disease or condition	
Other condition, please write in	

Scottish Official Statistics: Categories from the Scottish Census 2011

I would prefer not to answer this question	
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### Ethnic Group

Please indicate your ethnic group by ticking one of the boxes below

<b>White</b>	
Scottish	
Other British	
Irish	
Gypsy Traveller	
Polish	
Any other white ethnic group, please write in:	
Mixed or multiple ethnic origin, please write in:	
<b>Asian, Asian Scottish or Asian British</b>	
Pakistani, Pakistani Scottish or Pakistani British	
Indian, Indian Scottish or Indian British	
Bangladeshi, Bangladeshi Scottish or Bangladeshi British	
Chinese, Chinese Scottish or Chinese British	
Other, please write in:	
<b>African</b>	
African, African Scottish or African British	

<b>Caribbean or Black</b>	
Caribbean, Caribbean Scottish or Caribbean British	
Black, Black Scottish or Black British	
Other, please write in:	
<b>Other Ethnic Group</b>	
Arab, Arab Scottish or Arab British	
Other, please write in:	

Scottish Official Statistics: Categories from the Scottish Census 2011

I would prefer not to answer this question	
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### **Religion or belief**

What religion, religious denomination or body do you belong to?

None	
Church of Scotland	
Roman Catholic	
Other Christian, please write in	
Muslim	
Buddhist	
Sikh	
Jewish	
Hindu	
Another religion or body, please write in	

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**Thank-you for taking the time to fill out this survey**