



STORIES IN LIVING COLOR – TELLER INFORMATION FORM

LAST NAME: Larkin

FIRST NAME: Kira

AGE: 43

EMAIL ADDRESS: kaydielle0618@gmail.com

PHONE (OPTIONAL): 801-898-5472

LOCATION (CITY or TOWN, STATE): Utah
(Country if outside USA)

IDENTIFYING ETHNIC GROUP: White

COMMUNITY (OPTIONAL): Blind

Please put something in either or both of the above fields. The “community” field is meant for communities that experience discrimination such as religious groups, LGBTQ groups, etc.

SHORT DESCRIPTION OF STORY IDEA, THEME, KEY INTERSECTIONAL INFORMATION; Other tellers will contact you if what you put here resonates with them, their experiences, and their story idea(s)

My parent raised me to be independent. However, I still face people who think that because I am blind I am unable to do many things. One of the biggest area where I face discrimination is in the theater field. I'm still trying to convince someone I've worked with for years that I am able to do some things on the stage by myself without a guide.