



## Public Event Disability Access Accommodation Request Form

*An event attendee with a qualified disability may use this form to request a reasonable accommodation for a City of Lafayette sponsored event.*

Submit the completed form to the event contact person at least five business days prior to the event. If appropriate, the event contact person or a representative from the City of Lafayette (City) can complete the form by phone or in person.

PLEASE PRINT OR TYPE-ATTACH EXTRA SHEETS IF NECESSARY

Today's Date: \_\_\_\_\_

1. **Contact Information for the person making the accommodation request:**

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

2. **Event Information**

Event Name/Title: \_\_\_\_\_

City Sponsoring Department: \_\_\_\_\_

Event Date and Day: \_\_\_\_\_

Event Time (beginning and end): \_\_\_\_\_

Event Location: \_\_\_\_\_

If your accommodation is for a specific City sponsored event, please **attach** a copy of the event description (i.e.-poster, flyer, brochure, advertising, etc.) if it is readily available.

3. **Accommodation Information:**

What accommodation(s) are you requesting? Please be as specific as possible.

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Why do you need this accommodation(s) to attend/participate in this event? (Documentation may be required to determine whether you are eligible for an accommodation due to a disability.)

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**Signature of Person\* Requesting Public Access Accommodation:**

\_\_\_\_\_ Date: \_\_\_\_\_  
Person/Parent/Guardian

\*For a person under age 18, a parent or legal guardian must sign this form.

Mail, fax or send this form by email to the department contact person sponsoring the event (see poster, flyer, brochure, or advertising for the sponsoring department's contact information.

**(Insert event contact Name and Department)**

**Your request for accommodation will be assessed by the department sponsoring the event in consultation with the City's ADA Coordinator for final recommendation to the sponsoring department regarding the request.**

Additional questions, please contact the sponsoring department contact person or:

**City of Lafayette ADA Coordinator  
Phone 765/807-1060; Fax 765/807-1064**