

# Anvil Arts Access List



Name.....

Anvil Arts Account No.....

Address.....

..... Postcode.....

Tel (daytime)..... (evening)..... (mobile).....

Email..... Fax.....

## Access Requirements: (please tick all that apply)

- Aisle seat
- Space for assistance dog
- Accompanied by an essential carer (only available if you require assistance from another person in order to use facilities within an Anvil Arts venue)
- Wheelchair space
- Infra-red hearing enhancement headset
- Seating requirement for another reason, please specify:
- Information in alternative formats (Braille, large print etc.), please specify:

Please note that providing this information is not a guarantee that suitable places will be available at all performances.

People who intentionally give false information will be taken off the Access List and asked to leave the venue. This list will be monitored regularly.

## I have a disability as defined by the Disability Discrimination Act

Signed ..... Date.....

- Members of the Access List will be sent a free copy of the events brochure. Please tick if you do not wish to receive this.
- I would prefer not to receive updates about other events, developments and activities at any Anvil Arts venue in addition to my access list information.

### Please return to:

Access List, The Anvil, FREEPOST BZ 735, Churchill Way, Basingstoke, Hants RG21 7QR (no stamp required)

<b>FOR OFFICE USE ONLY:</b> Processed by: _____	Date: _____
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