



## Marvellous Festivals Access List

Name .....

Address .....

.....

..... Postcode .....

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

Email.....fax.....

Access Requirements: (please tick all that apply)

Accompanied by an essential carer (only available if you require assistance from another person in order to attend)

Wheelchair space

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 (1995)

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

Please return to:

Marvellous Festivals, 39 King Street Lane, Winnersh, Wokingham, Berks, RG41 5AX