

ACCESS REQUIREMENT REGISTER RENEWAL FORM

APPLICATION PROCESS

The renewal can be made by either the disabled person or by the Personal Assistant (essential carer) if they will be booking tickets on behalf of the disabled person. If you are a Personal Assistant who cares for more than one individual you will need to apply separately for each person you assist.

THIS FORM CONTAINS 4 SECTIONS

Sections A and Section C will need to be filled out **for all applications**. We require this information so that we can renew your access card.

Section B need only be filled out for customers who still require a **Personal Assistant** to attend the venue with them.

Section D

Change in Details

Please use this section to update any changes to your contact details and/or circumstances that relate to the individual registered on the access requirement register.

Please note that providing information is not a guarantee that accessible seats will be available at all performances.

SUBMITTING YOUR FORM

You can email your completed form to **trch.access@nottinghamcity.gov.uk** There is a version of the form online if you wish download it from our website **trch.co.uk**

Or, post your completed form to:

Access Requirement Register Theatre Royal & Royal Concert Hall Theatre Square Nottingham NG1 5ND

If you have any questions about this process or require this form in an alternative format contact us on **0115 989 5555**

SECTION A

ID Number on card that is due to expire

Name of Disabled Person

□ Please tick the box to consent to the Theatre Royal & Royal Concert Hall storing your information for purposes of the Access Requirement Register

For your convenience we will register you for 3 years, we would like to retain your information so that you do not need to re-submit it every year. The information you supply for the Access Requirement Register will help us to find appropriate seats for you quickly and easily and will save time when you book in future. We do not share personal data with any third party organisations.

People who intentionally give false information will be removed from the Access Requirement Register. This list will be monitored regularly.

SECTION B

For customers who are entitled to a free personal assistance ticket and who have already shown proof in their original application.

Please tick to confirm that the circumstances relating to the individual attached to the ID number above remain in date and you are still in receipt of one of the following documents:

PIP / DLA / Attendance Allowance / CredAbility Access Card (with +1 icon)/ registered severely sight impaired/ Recognised Assistance Dog ID card/ other – please state

SECTION C

I have a disability as defined by Equality Act (2010)

Please refer to the **Access Requirement Register Information Sheet** for further information on the Equality Act

If you have downloaded the form to complete electronically please type your name in the space below instead of signing it

Signed

Name

Date

□ Please tick this box if you are filling in the form on behalf of someone else

Section D – Update to any details

Please complete any of the below if your contact details or circumstances have changed in the last three years and you are the person registered for an ARR card

Address – if changed

Phone Number – if changed

Email - if changed

Please complete the below if your circumstances have changed ACCESS REQUIRMENTS (please tick all that apply)

I must be accompanied by a Personal Assistant during my visit **PROOF OF ELIGIBILITY REQUIRED FOR A FREE PA TICKET – PLEASE REFER TO ACCESS REQUIRMENT REGISTER INFORMATION SHEET FOR MORE INFORMATION**

	Wheelchair	space
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- A bigger space required for a larger wheelchair or scooter
- □ Wheelchair transfer seat on the end of a row
- Aisle seat left leg near aisle
- Aisle seat- right leg near aisle
- Space for assistance dog in the auditorium
- Dog sitting service
- □ Infra-red hearing enhancement (Headsets and Neck Loops required)
- Sign Language Interpreted Performance
- Relaxed Performance
- Audio Described Performance
- Captioned Performance
- Touch Tour
- Guiding Assistance for blind or partially sighted customers
- Storage of Walker or other equipment

Please provide any additional information you think might be useful for us to know

Other additional needs – please give details below

If you would like to receive our Seasonal Brochure in an alternative format, please indicate below

- Audio CD
- Braille

Large Print

If you have anything you would like to discuss further with our team please write your question below and one of our team will contact you.

QUESTION ...

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