

Belgrade Theatre Access Register Application Form



Please read the accompanying Belgrade Theatre Access Register Information

Please complete this form in order to access discounted tickets, support and benefits offered to disabled persons. The application is made in the name of the person that requires support with access, however the form can be completed either by the individual or by someone else on their behalf. If required our box office staff can complete the form for you – please ask. We require this information so that we can assist with your needs and be sure that we offer you the best possible service to improve your enjoyment during your visit. Please note that providing information is not a guarantee that accessible seats will be available at all performances.

THIS FORM CONTAINS THREE SECTIONS

Section A and **Section B** will need to be filled out for **all** applications. Please ensure that you only send **copies** of your proof of eligibility as all evidence documentation will be securely destroyed once your application has been processed.

Section C need **only** be filled out by customers unable to attend the theatre without a free carer.

SECTION A – PERSONAL DETAILS

Name of Applicant		
Name of ticket purchaser <i>(only complete this section if you are filling in this form on behalf of someone else)</i>	Email:	Relationship to applicant: Phone Number
Applicant Address		
Postcode		
Applicant Phone Number		
Applicant Email		

Please note that the Belgrade Theatre will only use the information given to provide the best possible service to you and to suit your particular requirements. We will not release any information given on this application to outside organisations.

Data Protection: The Belgrade Theatre is required to store the information provided in this application form in order to administer the Access Register. If you are not already signed up to receive updates on Belgrade offers and events, and would like to do so, please let us know your contact preferences:

By email

By post

SECTION B – ACCESS REQUIREMENTS

The information that you provide below will enable us to offer the best available seats for your particular requirements and also allow us to advise you of the services we have available during your visit.

Please tick all that apply from the list below:

	My access needs mean that I must be accompanied by a free carer during my visit (<i>if you tick this box, then you must complete section C of this application form</i>)
	I will require a wheelchair space for a standard sized wheelchair
	I will require a wheelchair space for a larger wheelchair
	I am a wheelchair user who is able to transfer into an aisle seat
	I have an assistance dog with me
	I require a seat that does not require use of any steps
	I'm interested in Sign Language Interpreted Performances
	I'm a Captioned Performance user
	I'm an Audio Described Performance user
	I'm interested in Relaxed Performances
	I'm a Touch Tour user
	I'm interested in Dementia Friendly Performances
	I require a Sound Enhancing Headset
	I require meeting by Theatre staff from the Disabled Drop-off Point. Please note that you will also need to email us on boxoffice@belgrade.co.uk to advise us when you will be arriving for this to be actioned.

Please provide in the space below any other information you think may be useful for us to know:

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Please select from the list below the documentation you will provide.

	A letter confirming receipt of Disability Living Allowance
	A Local Authority Mobility Card/Pass
	A Disabled Person's Railcard
	Local Authority Registration Card/Certificate for Visual Impairments
	A Relevant Doctor's note (valid for 6 months)
	I am a wheelchair user (please also complete section C below)

Please only provide a copy of the document you wish to offer as proof of eligibility. Please note that once we have received this it will be securely destroyed.

SECTION C – PERSONAL ASSISTANTS/CARERS

Please only fill out this section if you have a disability that prevents you from attending an event without a free carer.

Please tick the box next to the evidence you are submitting. Please ensure that you only send copies of your proof of eligibility as all evidence documentation will be securely destroyed once your application has been processed

	Award letter for Personal Independence Payment - Enhanced Rate Daily Living or Mobility Component
	Award letter for Disability Living Allowance - Highest Rate Care Component or Higher Rate Mobility Component
	Award letter for Disability Living Allowance - Middle Rate Daytime Care Component
	Award letter for Attendance Allowance - Higher Rate
	A certificate or card of Visual Impairment
	None of the above. I wish to send alternative evidence. Please complete the box below outlining any exceptional circumstances which you feel entitle you to a free carer ticket. Evidence must be provided and only exceptional circumstances will be approved.

Please tell us why you are unable to attend the Theatre without a free carer ticket:

Details of alternative evidence enclosed (copies only):

By providing this information, you are declaring that you are only able to attend the Belgrade Theatre with the support of a free carer ticket. Please ensure that the information you have given is accurate. People who intentionally give false information will have their details removed from the Access Register. This register is regularly monitored and you may be required to re-apply every two years.

Thank you for completing the sections above.

If you wish to offer any further information in support of any elements of this application, please do so below:

SEN SCHOOLS, CAREHOMES & CHARITY SUPPORT GROUPS

Proof of eligibility for each individual is not required, but we need you to produce a letter from your organisation on official letterhead that explains this for the group you are booking for and that personal assistants/carer are needed for one to one support for the individuals. Please remember to do a risk assessment for your visit to the theatre.

If you have any questions regarding this application, please contact the Box Office on **024 7655 3055**, or via email at boxoffice@belgrade.co.uk

Please return your completed form and accompanying documents to: **Access Register, Box Office, Belgrade Theatre, Belgrade Square, Coventry CV1 1GS** or email: BoxOffice@belgrade.co.uk

I confirm this information is correct on the date of signing the form:

Signed

Name

Date

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

SUBMITTING SUPPORTING DOCUMENTS

When submitting documents to support your application you can speed up the process by:

- Scanning evidence and attach it with your form if emailing
- Photocopy evidence and clip it to a printed form if posting

Please feel free to blackout any information on documents submitted that you do not wish us to see.

Entry onto the register and decisions regarding free tickets and discounts are entirely at the discretion of The Belgrade Theatre. The Belgrade Theatre reserves the right to make changes as it sees fit to the eligibility criteria for this register.

December 2018