



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.

Please submit the completed form to the event contact person at least five (5) business days prior to the event. If appropriate, the event contact person or representative from the City of Lafayette can complete this form by phone or in person. Please print or type your responses and attach extra sheets if necessary.

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

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ E-mail: _____

2. Event Information:

Event Name: _____

City Sponsoring Department: _____

Event Date and Day: _____

Event Time (start and end): _____

Event Location: _____

Please submit a copy of the event description if you have it available (e.g. poster, flyer, brochure, advertising, etc.)



3. Accommodation Information:

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

Why do you need this accommodation(s) to attend/participate in this event?
Additional documentation may be required to make a determination.

Signature of Person* Requesting Public Access Accommodation:

Signature: _____ Date: _____

**Requests for person(s) under age 18 require a parent or legal guardian signature.*

Completed forms should be returned to the department sponsoring the event (listed in the event details). Your request for accommodation will be reviewed by the department sponsoring the event in consultation with the City’s ADA Coordinator for final recommendation.

If you have additional questions, please contact the department sponsoring the event or the City of Lafayette ADA Coordinator at 765-807-1063 or hrhelpdesk@lafayette.in.gov.