**Participant Accommodation Form**

The PSAC Accommodation Policy strives to ensure that meetings are barrier-free for members. Once selected, members may be required to further specify their accommodation needs in order to facilitate their participation in the meeting.

* I am a member with a disability and require accommodation.

What are the functional limitations arising from your disability? (You are not obligated to disclose your diagnosis, only your functional limitations.)

* I require that the PSAC arrange for a personal care attendant to assist me to fully participate at the Conference.
* I require documentation in alternative media
* I require sound amplification
* I require a sign language interpreter
* I require an oral interpreter
* I require that the PSAC arrange for a Reader (for a person with a visually related disability) to assist me in order for me to fully participate in the meeting.
* I will be using animal assistance (i.e. guide dog) at the Conference

**You may be required to provide relevant medical documentation that will assist us to respond to your request.** This information will not be disclosed except where necessary to respond to your request for accommodation.

**Special Dietary Requirements or Allergies**

* I have dietary requirements or allergies that the PSAC should be aware of

Please specify:

**FAMILY CARE**

The objective of the PSAC Family Care Policy is to remove one of the barriers which prevents **members** from participating fully in Union activities and which provides for the reimbursement of family care expenses. A copy of the policy is available on the PSAC web site at <http://psacunion.ca/family-care-policy>.

**HOTEL ACCOMMODATION**

The PSAC North has reserved a block of rooms at The Explorer Hotel. West, Yellowknife, NWT. This hotel is unionized and accessible. **Please note that The Explorer Hotel is a 100% smoke-free environment.**

For participant applications only:

□ I require specific accommodation for my disability in my hotel room.

Please specify:

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Name:

Date:

Telephone #:

Email address: