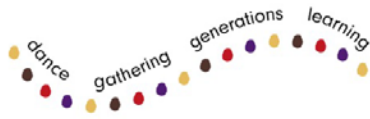




Panpapanalya  
2018 Adelaide Australia



## ACCESS

Please complete this form to tell us about your access needs. Information is confidential and will be used to assist the Congress organisers to make reasonable efforts to meet your specific needs as far as is possible within available resources.

### Participant &/or Parent/Guardian Access Requirements:

#### Please complete below.

Written Information Format (please tick)

Standard  Large Print  Audio

Other  \_\_\_\_\_

Do you require communication support? Yes  No

If yes, please indicate requirements: \_\_\_\_\_

Auslan

Other  \_\_\_\_\_

Do you require wheelchair access? Yes  No

Do you have a mobility impairment that would restrict the use of steps?

Yes  No

Do you need orientation to the venues? Yes  No

Would you like to be contacted to discuss your needs? Yes  No

How would you like to be contacted?

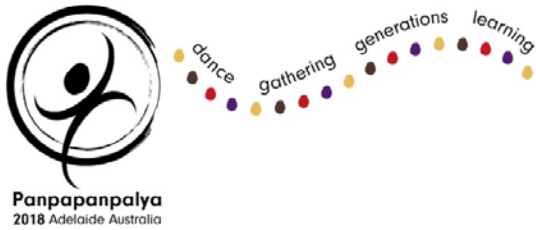
Phone: Yes  No

Mobile: Yes  No

Text only: Yes  No

Email: Yes  No

Other: \_\_\_\_\_



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Please use the space below to tell us of any other **access requirements** or appropriate **medical information** and/or **allergies** that have not been covered or anything you feel we should know:

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