**Personal Assistant Application Form**

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| **Applicant Name:** |
| **Address:** |
| **Telephone Number:**  |
| **E-mail:**  |
| **Please indicate your access requirements by selecting one or more of the list below:*** Personal Assistant Seat
* Wheelchair space
* Seat near to the front
* Seat on the end of a row
* Seat near the exit door
* Provision for guide/assistant dog
* Other (Please specify):
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| **Confirmation of supporting documentation to go along with the application (all applications require a copy of at least one of the following documents)*** Front page of a Disability Living Allowance or PIP document
* Certificate of Visual Impairment
* Proof of CredAbility Access Card
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**Please return the completed form with accompanying documents to –**

National Centre for Early Music

St Margaret’s Church

Walmgate

York

YO1 9TL

or by e-mailing boxoffice@ncem.co.uk