

Access Membership Form



Please return the completed form by post or by email:

Access, Marina Theatre, Marina, Lowestoft, NR32 1HH

info@marinatheatre.co.uk (forms will need to be printed, signed and scanned)

If you have any questions about the Access Membership scheme, or how to complete this form, please contact the Box Office on 01502 533200 or email info@marinatheatre.co.uk

Individual who has access requirements:

Name _____

Address _____

_____ Postcode _____

Telephone Number _____

Mobile Number _____

Email Address _____

Date of Birth (if under 16) _____

Please use my details to send me information about products, events, offers and ways in which I can support the Marina Theatre

☐

By Post

☐

By Email

☐

Don't Send

If we need to contact you directly about your order (such as booking reminders, feedback requests, or membership information) what's the best way to contact you?

☐

By Post

☐

By Email

☐

By Telephone

By submitting this form you acknowledge that the data provided by you will be processed in accordance with the Marina Theatre privacy policy. This can be read at marinatheatre.co.uk/privacy-policy, or call 01502 533215 to be sent a copy.

I consent to the information provided about my Access requirement being added to the Marina Theatre database for the duration of my membership

Signed _____ Date _____

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Ticket booker:

If someone, on occasion, books theatre tickets on your behalf (family/friend/group booker), please provide us with their details below. Please continue on a separate sheet if more than one person books on your behalf.

Name _____

Address _____

_____Postcode _____

Telephone Number _____

Mobile Number _____

Email Address _____

Please use the above details to send the ticket booker information about productions, events, offers and ways they can support the Marina Theatre

☐

By Post

☐

By Email

☐

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You also confirm that the person above has given permission for you to share their information.

Signed _____ Date _____

Your Access Requirements: (please tick all that apply)

Remember to let us know if any of these change

Pre-visits: We would be very happy for you to come in for a 'pre-visit' so you can see what we can offer and find out what works best for you. For more information, or to book a pre-visit, please call 01502 533200 or email info@marinatheatre.co.uk

Seating	✓	Visually Impaired	✓
I require a Wheelchair Space		I would like to attend Touch Tours	
I would like to borrow a Wheelchair for my visit		I would like to bring my Guide Dog to the performance	
I require an Aisle seat		I require a Large Print season brochure	
I require Step Free access to my seat			
I require a seat close to an Exit			
I require a seat close to the Accessible Toilet			
Hearing Impaired	✓	Other	✓
I would be interested in attending a British Sign Language performance		I prefer to attend Relaxed Performances	
I require a Sennheiser Infrared Hearing System unit		I would like to bring my Assistance Dog (not Guide Dog) to the performance	
		I am on the Autism Spectrum or have a Sensory or Communication Disorder or Learning Disability	
		I am living with Dementia	
		I have no specific needs	

Anything else, not covered above? (Use separate sheet if necessary)

Essential Companion:

If you require essential assistance during your visit in order to fully enjoy your time with us, you may be eligible for Essential Companion Tickets. Essential Companion eligibility allows you to bring a companion with you, free of charge, if you feel that you could not attend without one.

Essential Companion status lasts for a 12month period. At the end of your 12month period you will need to re-apply.

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I need essential assistance during my visit in order to full enjoy my visit to the Marina Theatre

To qualify for Essential Companion tickets you **must** provide a photocopy of your most recent documentation. It must be dated within the last 12 months. On occasion we may ask to see the original document.

We accept the following:

- Disability Living Allowance or Personal Independence Payment
- Attendance Allowance
- Certificate of Visual Impairment
- CEA Card or Disability Railcard
- A Doctor's letter
- Carers allowance of nominated carer

Declaration:

Please sign below to confirm that the information provided in this form are true and correct to the best of your knowledge. Members who intentionally give false or misleading information will have their Access Membership revoked.

Signed _____ Date_____

Marina Theatre reserves the right to review and amend the scheme without prior notice and may require members to re-apply after the review.