

January, 2008

## **Access to Convention for Delegates with a Disability**

Deafness, blindness, mobility impairment, partial paralysis, as well as invisible disabilities affect many trade union members as a result of workplace or other injury or disease. Such disabilities prevent full participation only when external barriers hinder access.

We, therefore, request your local to advise members that a disabling condition need not deter them from coming to convention. If we are advised in advance, services such as the following will be made available to attendees.

<b><u>Condition</u></b>	<b><u>Service</u></b>
Deaf, hard of hearing	Sign language interpreting services
Blind, vision impaired	Large print documents
Restrictions on mobility	Accessible accommodation

**PERSONAL ASSISTANCE REQUEST FORM  
TURN OVER**

# PERSONAL ASSISTANCE REQUEST FORM

Last name _____	First name _____
Home Address _____	
City _____	Postal Code _____
Email _____	
Phone (Home) _____	(Work) _____
Local # _____	Regional Office _____

## CONVENTION FLOOR

- Deaf                       Hearing impaired   
    Signer Required: Yes  No
- Blind                       Vision impaired
- Wheelchair                       (Wheel hub to hub measures \_\_\_\_\_ cm.)
- Are there any special needs to be accommodated for any Convention activities (e.g. Convention floor, hotel room)? Please specify:

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**• Please note ergonomic chairs cannot be provided. If you have back problems, please bring your own Obus Forme.**

## ACCOMMODATION

- I will need assistance in evacuating my room
- I use crutches and need to be near an elevator
- I use a roll-in shower

**Please complete and return this form to Nympha Chan, Conferences Secretary by fax: (416) 448-7468 or via the regional offices.**