

AODA – Visitor Emergency Assistance Request Form

(to be completed by visitor to the building including placement students, volunteers, etc.)

We ask all visitors with disabilities who require assistance during an emergency to complete this form to help our Agency identify any barriers that could be a factor in the event of an emergency.

The information you provide will help us to ensure that you are provided with the necessary information and/or a required assistance, should there be an emergency while you are visiting one of our buildings. All information collected will be kept confidential and will only be shared with your consent.

Visitor Information:

Date:	
Name:	
Phone Number:	
Email:	
Purpose of visit to the building/facility:	
Area of building accessed (e.g. access area, meeting room, etc.):	

Emergency Contact Information:

Name:	
Telephone:	
Email:	
Other:	
Relationship:	

Assistance Required:

List assistance required, including any equipment, device or personal supports:

Signature

Date