

ACCESS 2 ENTERTAINMENT CARD APPLICATION FORM

SECTION A

A National Advisory Council of Disability Organizations in conjunction with the Access 2 Entertainment Partners have developed a program that will provide discounted admission to the support person accompanying a person with a disability at member movie theatres across Canada.

Application for the **Access 2 Entertainment Card** must be verified by a Registered Health Care Professional as defined in Section C (Health Care Provider Information) or by presenting a copy of an authorized client identification card from a recognized disability service provider (for example the CNIB client identification card) and the applicant must be a client/patient of the authorizing health care practitioner/service provider.

DEFINITION:

A support person is an individual who accompanies a person with a disability to provide the applicant with those services that are not provided by theatre employees, such as assisting the person with eating, administering medication, communication and use of the facilities.

TERMS AND CONDITIONS:

1. The application form must be submitted by a person with a disability or a legal guardian on his or her behalf.
2. The applicant must be identified as having a disability by a registered health care professional or recognized service provider and he/she must be a client/patient of the authorizing health care professional/service provider.
3. The applicant must present the **Access 2 Entertainment Card** along with personal identification at the movie theatre Box Office when purchasing his or her own movie ticket.
4. The person with a disability and support person must attend the movie together.
5. The discounted admission fee for the support person will be free or no more than \$3.00. Prices may vary from theatre chain to chain.
6. This program is administrated by Easter Seals / March of Dimes National Council on behalf of the Access 2 Entertainment Partners and the National Advisory Council of Disability Organizations. Please allow 4 to 6 weeks for processing of your application and delivery of your **Access 2 Entertainment Card**.
7. This card shall be valid for a period of 5 years from date of issue after which a renewal application form must be filed with Easter Seals / March of Dimes National Council.
8. Misuse or abuse of this card shall result in the immediate termination and confiscation of the card and its privileges.

9. These terms and conditions are subject to change without notice under the authority of the Access 2 Entertainment Partners and the National Advisory Council of Disability Organizations.

SECTION B
PERSONAL INFORMATION
PLEASE PRINT

Applicant's Name: _____

Address : _____

City: _____ Province: _____ Postal Code: _____

Telephone: _____ Email: _____

Are you a client or member of a recognized disability service provider?

Yes _____ No _____

If yes, please provide a photocopy of your client identification card along with your application and indicate which recognized disability service provider you're a client/member of below.

Service Provider: _____

If no, have your health care practitioner fill out section C of this application form.

PRIVACY:

Easter Seals / March of Dimes National Council is committed to protecting the privacy, confidentiality, accuracy, and security of any personal information that we collect, use, retain, and disclose in the course of the services we offer.

I hereby certify that I have read and understood all the terms and conditions as set forth in the application for the **Access 2 Entertainment Card**.

Signature: _____

Date: _____

SECTION C
HEALTH CARE PROVIDER INFORMATION
PLEASE PRINT

Name of Authorized Health Care Professional: _____

Registration Number (if applicable): _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Telephone: _____ Email: _____

Please indicate category of Authorized Health Care Professional:

- Physician
- Nurse
- Social Worker
- Occupational Therapist
- Physiotherapist
- Pharmacist
- Rehabilitation Counsellor
- Audiologist

Other (explain): _____

PRIVACY:

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I hereby certify that the applicant is a person with a disability in accordance with the provisions of the **Access 2 Entertainment** application and this applicant is a client/patient of mine.

Signature: _____

Date: _____

SECTION D
ACCESS 2 ENTERTAINMENT CARD PARTNERS

Participating Theatre Chains Include:

Famous Players

www.famousplayers.com

Cineplex Galaxy LP

www.cineplexgalaxy.com

Empire Theatres

www.empiretheatres.com

Landmark Cinemas

www.landmarkcinemas.com

Rainbow Cinemas

www.rainbowcinemas.ca

Magic Lantern Cinemas

www.rainbowcinemas.ca

Capital Theatres (Yellowknife)

Theatre Near You (Burnaby, Surrey, New Westminster BC)

... and other Members of the Motion Picture Theatre Associations of Canada. Please check with your local theatre to confirm participation in this program.

National Advisory Council of Disability Organizations

Canadian Abilities Foundation

Tel: (416) 923-1885

Web: www.abilities.ca

Canadian Association of the Deaf

Tel: (613) 565-2882

Web: www.cad.ca

TTY: (613) 565-8882

Canadian Association of Independent Living

Tel: (613) 563-2581

Web: www.cailc.ca

TTY: (613) 563-4215

Canadian Hard of Hearing Association

Tel: (613) 526-1584

Web: www.chha.ca

Toll Free: (800) 263-8068

Canadian Paraplegic Association

Tel: (613) 723-1033

Web: www.canparaplegic.org

Easter Seals / March of Dimes National Council

Tel: (416) 932-8382

Web: www.easterseals.ca

Multiple Sclerosis Society of Canada

Tel: (416) 922-6065

Web: www.mssociety.ca

Toll Free: (800) 268-7582

National Federation of the Blind: Advocates for Equality

Tel: (800) 561-4774

Web: www.nfbae.ca

People First Of Canada

Tel: (204) 784-7362

Web: www.peoplefirstofcanada.ca

Toll free: (866) 854-8915

**This program is administrated by Easter Seals / March of Dimes National Council.
Please submit an original application form to:**

**Easter Seals / March of Dimes National Council
90 Eglinton Avenue East, Suite 208
Toronto, Ontario M4P 2Y3**

**To locate accessible resources and access to entertainment partners in your
community, please visit Access Guide Canada at www.abilities.ca/agc.**

**Additional application forms are available from all members of the
Access 2 Entertainment Card Partnership**

Access 2 Entertainment is a trademark of
Easter Seals/ March of Dimes National Council

Alternate Formats Are Available Upon Request.