Santa Barbara Arts and Crafts Show
Request for Accommodation

Please review the Arts and Crafts Show Procedures and Regulations Section regarding Handicapped Spaces.

Today’s Date: __________________________
Name: __________________________________________
Address: __________________________________________
City: __________________________ Zip: __________
Phone: __________________________ Email: __________________________

What is the nature of the disability?: __________________________________________

Briefly describe the effects of your disability and how it might impact your function in Arts and Crafts Show?: __________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

Which space are you applying for and how does this space address your specific needs?: 
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

(Attach additional supporting documents including physician’s recommendations if necessary)

Is this request for accommodation due to a temporary or permanent disability? ______________

Signature __________________________________________ Date ______________
Permit Holder

Please Return to:
City of Santa Barbara
Arts & Crafts Show
100 E. Carrillo St.
Santa Barbara, Ca. 93101
Fax: 805-897-2520

Office use only:
☐ Art Section  ☐ Craft Section

Assigned Space: ______________

Date Assigned ______________