



**Orangevale Recreation & Park District**

6826 Hazel Avenue  
Orangevale, CA 95662

Phone: (916) 988-4373 Fax: (916)988-3496 [info@ovparks.com](mailto:info@ovparks.com)

**Reasonable Accommodation Request Form**

*Please Print Legibly*

*I am requesting an accommodation that will allow me or my child to participate in an Orangevale Recreation & Park District offered program, activity, or service. For program purposes OVparks requires a copy of your child's local school SEP/IEP or Special/Individual Education Plan. (Please note that OVparks requests a two week notice to ensure your accommodation can be met.)*

Date: \_\_\_\_\_

Name of participant in need of accommodation: \_\_\_\_\_

Parent/Guardian's Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Street Apt# City State Zip

Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

.....  
Program Name: \_\_\_\_\_

My specific functional limitation is: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Describe the accommodation being requested: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Describe how the accommodation will assist you in participating in the activity, program or service offered by the Orangevale Recreation & Park District: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date