

**CITY OF SAN CLEMENTE**  
**AMERICANS WITH DISABILITIES ACT (ADA)**  
**Title II ADA Reasonable Accommodation Form**

This form is an initial step in processing your request for an accommodation under Title II of the ADA. An accommodation is a reasonable modification or adjustment that enables a qualified person with a disability to enjoy the same access to facilities, services, activities, and programs that are enjoyed by persons without disabilities.

Under the ADA, the term "disability" means a physical or mental impairment that substantially limits one or more major life activities of such individual. Major life activities include, but are not limited to, caring for oneself, performing manual tasks, seeing, hearing, eating, sleeping, walking, standing, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, communicating, and working. An impairment is a disability if it substantially limits the ability of an individual to perform a major life activity as compared to most people in the general population.

If you cannot fill out this form or require assistance to do so, please contact the **Recreation Division** at **(949) 361-8264** or by email at [recreation@san-clemente.org](mailto:recreation@san-clemente.org) and they will gladly assist you.

If accommodations are needed for an event, please allow four (4) business days prior to the event to process your request and to make appropriate accommodations if they are approved. If requests are made less than four (4) days in advance, the City will still attempt to make the accommodation. If you require additional space to provide your information, please attach additional sheets to this form, identifying the paragraph(s) being answered.

To request a reasonable accommodation, fill out this form and return it in person or mail to **Melissa Muraira, Recreation Supervisor 100 N. Calle Seville, San Clemente, Ca 92672**, or via email to [murairam@san-clemente.org](mailto:murairam@san-clemente.org). For questions, contact the City's Interim ADA Coordinator, Hanne Thordahl, at 949.361.8313, or by email at [thordahlj@san-clemente.org](mailto:thordahlj@san-clemente.org).

Name:	
Address:	Home Phone:
City/State/Zip Code	Cell Phone:
Email:	

Reasonable Accommodation Request Details:

Activity/Event with date:
Activity/Event Location:

Explain the limitation(s) that require(s) the reasonable modification ( <b>DO NOT DISCLOSE YOUR DISABILITY OR MEDICAL INFORMATION</b> ):	
Requested Accommodation (Please Select from the Following).	
	Braille
	Large Print
	Sign language Interpreter
	Accessibility for a person with a mobility device
	Other (Describe):

\_\_\_\_\_

Signature

\_\_\_\_\_

Print Name

\_\_\_\_\_

Date