FORSYTH COUNTY GOVERNMENT ADA ACCOMMODATION REQUEST FORM

This form may be used by any member of the public or guest of Forsyth County Government to request a disability-based accommodation(s) to access a Forsyth County Government sponsored program, service, facility, or activity. Every effort will be made by Forsyth County Government to provide a reasonable accommodation, unless doing so will fundamentally alter the nature of the program, service, or activity, or the accommodation would impose an undue financial or administrative burden on the County.

Forsyth County asks that you submit this form at least 72 hours prior to the Forsyth County Government sponsored program, service, or activity you would like to attend. Please submit the completed form to the address or email below.

Address: Department of Public Facilities or Email: adacoordinator@forsythco.com
Attn: ADA Coordinator
514 West Maple Street, Suite 1201

Telephone - Home:	 Cell:	Email:
-		
Person making request (if other than per	son who needs	accommodation)
Name:		
Relationship to person requesting accomr	nodation:	
Telephone - Home: (Cell:	Email:
State what Forsyth County Government n	rogram service	, facility, or activity and, if applicable the date, which is the
subject of your request:	rogram, service	, facility, or activity and, if applicable the date, which is the
subject of your request.		
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