

Accessibility Checklist

Tell us about you, so we can make sure your holiday is amazing!

Your holiday is important to us. If you have a disability or medical condition that requires special transport, accommodation, equipment or medication we strongly recommend that you fill in this form. You only need to share with us what you feel comfortable with, but we can assure you that any information you provide will be treated absolutely confidentially. We will use your answers to ensure that the transport, facilities and services are all in place for you to have a stress free adventure.

Your Details —		
Lead Passenger Name :*	Test Testing	
Enquiry Reference Number:*	OH617731	
Number of passengers that require assistance?*	1 2 3 4 5 6	
Passenger 1 Name:*	Test	
Passenger 2 Name:*		
Passenger 3 Name:*	Ert	
Passenger 4 Name:*	Ert	
Passenger 5 Name:*	Test	
Passenger 6 Name:*	Er	
How Can We Help?		
Passenger 4 "Ert"		
Will you be answering this form on behalf of yourself or someone else in your party? *		
Myself	Ert	

How would you describe the area(s) in which ert may require special assistance? Please tick all that apply*

Physical	Vision	Hearing	Cognitive
Other (please specify)			
	Ge	tting Around	_
Can ert walk more than 500 You may not always need assisted to be longer than you think.		assistance?* stances at an airport or on a ship can	Yes No
No, please give details:*	dsf		
Can ert walk or travel on thei for example, you may have vis he airport.	•	ce without assistance?* onfused in unfamiliar places such as	Yes No
Does ert use a wheelchair wh	ilst travelling?*		Yes No
Vould you like us to send you rt? *	ı a complimentary Hidden I	Disabilities Sunflower lanyard for	Yes No
	Whe	elchair Details	_
Vill ert be taking their own w	rheelchair?		Yes No
Vould you like us to register	ert's wheelchair with the ai	rline?	Yes No
Vill ert need a wheelchair or	mobility scooter at the airp	port or the destination resort?	Yes No
Vould you like us to arrange	a wheelchair or mobility sc	cooter for ert?	Yes No
s their wheelchair battery po f an airline or ship doesn't ask yo nyway for safety reasons.		eelchair battery, you should tell them	Yes No
f Yes, is it Dry Cell or Wet Ce When flying it may be required to uggage.		the wheelchair and carry it in your hand	Dry Wet
f their wheelchair is battery _l	powered, what are the dim	ensions?	
When OPEN:	Height (cm)		

When FOLDED:			
	Height (cm)	Width (cm)	Depth (cm)
	, can you board/leave a standard of companion you are travelling with?		Yes No
Will ert require an adapted p	ersonal vehicle, such as a car or va	n in resort?	Yes No
	Travelling on a Pla	ane, Coach or Ship	_
	a companion who will be able to proout of buildings/planes/coaches?		ed Yes No
	o the following without requiring y are accompanied by someone who		
Breathe without supplementa	ry oxygen:	Yes	No
Feed Yourself:		Yes	No
Administer your own medicat	ion if needed:	Yes	No
Use toilet facilities:		Yes	No
Escape from plane/ship in an	emergency:	Yes	No
Lift yourself in or out of your s	eat:	Yes	No
When travelling by plane, is i	t best for ert to sit by a toilet?	Yes	No
When travelling by plane, is it best for ert to sit by an aisle?		Yes	No
When travelling by plane, is t pest for ert to sit in?	here a section of the plane that is	Front	Middle Back
Would you like us to inform th preferences?	e airline of your seating	Yes	No
When travelling by plane, does ert have any specific dietary requirements or meal requests?			

Some airlines may, on request, will make reasonable efforts to arrange seating to meet your disability needs. These are not guaranteed and are subject to both the requirements and availability.

Medication and Oxygen —			
Will ert be taking prescribed mediation with them on holiday? Some countries restrict the types of medication you can carry. We adoctor and the National Travel Health Network and Centre (NaTh	• ,	Yes No	
Does ert have any medication that will require refrigeration? e.g. Insulin (may require a fridge in the hotel room) Yes No			
Is ert likely to require supplementary oxygen? Yes No			
Accommodati	ion Details	_	
Accommodation Type Home / Villa	Hotel/Ship		
Although we do our best to confirm that your villa requirements ca to 7-14 days to get confirmation from our suppliers.	n be satisfied as quickly as possil	ble, it can occasionally take up	
Please indicate what features you need in your vacation home:			
A single storey home?	Yes	No	
Please note that most homes will have al least 1 step into the home.			
A bedroom on the ground floor?	Yes	No	
A bathroom on the ground floor?	Yes	No	
An adapted bathroom?	Yes	No	
A shower with handrail?	Yes	No	
Roll in bathroom / shower? (with no step)	Yes	No	
A walk in shower? (May have a small step)	Yes	No	
Lower entry shower with seat?	Yes	No	

Lowered work surfaces on sinks	Yes	No
A fridge?	Yes	No
An accessible telephone?	Yes	No
Vibrating pads for alarm / alarm clock?	Yes	No
Regarding wheelchairs, does ert require:		
No carpets?	Yes	No
Wide door frames?	Yes	No
Extra space to get around home?	Yes	No
Pool area to be large enough to get your wheelchair around the outside?	Yes	No
Does ert require a hoist for the:		
Bed?	Yes	No
Bath?	Yes	No
Pool?	Yes	No
Any other requirements? Please specify:		
How many steps are you able to walk up/down unaided?		
Do you prefer a room on a particular floor?	Yes	No
Do you prefer a room that is close to a lift?	Yes	No
Please tick any special facilities you require in your room:		
Grab Rails	Accessible Telephone	
Vibrating pads for alarm / alarm clock	Fridge	

Adjustable Bed Height	Level Entry Shower
TV with Teletext	Washbasin with lever taps
Hoist for the Bed	
Other (please specify):	
Important Notice	
	d to suppliers responsible for facilitating your travel arrangements. The suppliers will do their best to meet
the requirements requested but as all	l requirements are different we cannot guarantee they will be met.
•	ecessary questions to make sure your holiday goes perfectly. If there is anything you think we se you think you may need, please let us know below:
Once you have filled out all of the	relevant field above, click on the button below to submit the form.











Copyright © 2023 ocean-florida.co.uk