



Ticket Office

Verona,

FORM FOR BOOKING ACCESS FOR DISABLED SPECTATORS

(booking is compulsory, does not guarantee access to the Show if not confirmed by the Organizer of the Event, and is subject to the availability of seats)

I, the undersigned born in
..... on holder of disability certificate N°
..... dated telephone number, e-mail
to which booking confirmation must be sent
.....,

Ambulant **On wheelchair**
(cross appropriately)

REQUEST

to attend the show entitled:
due to be held on, at the Arena di Verona Amphitheatre,
scheduled to begin at:.....

accepting, without any reservations, **the notification available on the web site www.arena.it**,
(**Home > Area Istituzionale > Adempimenti normativa privacy**) and the procedure arranged by the
Organizer of the Event for entrance to the location of the event and the seats that will be allocated
to me and the person accompanying me only and exclusively by the main Fondazione Arena ticket
office.

Undersigning this form, the undersigned states to have read the notification

I have read and give my consent (cross appropriately)

Signature

(in the case of minors, the signature must be that of whoever has parental authority, specifying his/her role, name and surname)

.....

Date

.....



*The Other
Side Of
Arena*
FILARMONICO
DI VERONA

I have attached the documentation attesting the disability and recognized degree of disability
PLEASE SEND THE FORM COMPLETED IN EVERY PART VIA E-MAIL TO E-MAIL biglietteria@arenadiverona.it

Fondazione Arena di Verona

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www.arena.it - sovrintendenza@arenadiverona.it