



## CITY OF CORNER BROOK

### Policy Statement

<b>Policy Title</b>	<i>Attendant Pass Program</i>	<b>Index:</b>	<i>Properties &amp; Facilities</i>
<b>Section:</b>	<i>City Facilities</i>	<b>Policy Number:</b>	<i># 08-01-06</i>
<b>Authority</b>	<i>Council</i>	<b>Adopted Date:</b>	<i>Date</i>
<b>Effective Date:</b>	<i>2025-10-01</i>	<b>Revision Date:</b>	<i>2025-08-13</i>
<b>Policy Owner:</b>			

1. **POLICY STATEMENT** The City of Corner Brook will remove barriers to events, activities and programs for individuals with disabilities by creating an attendant pass program allowing a care giver, guardian or support worker to be present with the participant during a City event, activity and/or program.

2. **PURPOSE** To provide guidelines for the allowance of an attendant, care giver, guardian or support worker accompanying people with disabilities to City of Corner Brook events, activities and/or programs that take place at City owned facilities and outdoor spaces.

3. **DEFINITIONS** "City event" – an event organized and or sponsored by The City of Corner Brook.

4. **PROCEDURE** The City of Corner Brook will require the person with a disability (the participant) to complete the application form provided in order to receive an attendant pass to participate in events, activities and/or programs. Application forms are available online, City Hall, Civic Centre and Marina Redmond Centre. Completed applications must be completed online or submitted at the Marina Redmond Centre.

City staff will require the participants name, phone number, address, photo and email address to create a file and pass for the individual. Attendant Pass will include pass number and expiry.

Applicants will be required to provide verification of requirements for an attendant. Verification can be provided by one of the following:

- Medical Doctor
- Registered Social Worker
- Disability Agency
- Or other healthcare professional as approved by the City

Attendant passes are valid for one year, from the date of issue.

The City of Corner Brook will ensure that outside organizers and promoters of City events will include the attendant pass in their contract.

Attendant pass holders will need to indicate they need an additional ticket at the time of purchase.

Regular pricing and fees are applied to the participant only and tickets to all events are on a public first come first serve basis.

When attending City of Corner Brook events, activities and/or programs attendant pass holders must display their attendant pass to staff in order to obtain free admission for the attendant. For programs or activities that require pre-registration attendant pass holders must call.

City, event staff, security will be trained and educated on the attendant pass program and be able to identify the pass during City of Corner Brook events, activities and/or programs.

5. SCHEDULE(S) (Optional)

6. AMENDMENT(S) (Mandatory)

Date of Council Decision	Report / Bylaw	Description

7. REVIEW(S) (Mandatory)

Date of Policy Owner's Review	Description

8. Reference:

Minute 25-121 Regular Meeting August 18, 2025

IN WITNESS WHEREOF this policy is sealed with the Common Seal of the City of Corner Brook.

[Redacted Signature]

[Redacted Signature]

City Clerk

[Redacted Signature]



# Attendant Pass Application

Recreation and Tourism Department

## Contact Information

Name of Applicant  
(Required):

\_\_\_\_\_

Date of Birth (Required):

\_\_\_\_\_

Applicants Address (Required):

Street:

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Address

Line 2:

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City,

State, Zip:

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Primary Phone Number  
(Required):

( )

-

\_\_\_\_\_

Secondary Phone Number:

( )

-

\_\_\_\_\_

## Caregiver Information

Caregiver Name:

\_\_\_\_\_

Caregiver Phone Number:

( )

-

\_\_\_\_\_

## Official Verification/ Reference

*Official verification/ reference can come from a Medical Doctor, Registered Social Worker, Disability Agency or other healthcare professional as approved by the City*

This is to verify that the applicant has a disability that requires an attendant to assist them to attend events, activities and programs in the community. Children under 12 may apply if a support person/worker is required in addition to a parent/guardian. You may upload a Medical Doctors note, Registered Social Workers letter of reference or a Disability Agency's letter of reference below.

Referee's Name (Required):

\_\_\_\_\_

Referee's Phone Number (Required): ( ) - \_\_\_\_\_

Referee's Email: \_\_\_\_\_

Referee's Address (Required):

Street: \_\_\_\_\_  
Address: \_\_\_\_\_  
Line 2: \_\_\_\_\_  
City, \_\_\_\_\_  
State, Zip: \_\_\_\_\_

## Declaration

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The information provided in the application is to the best of my knowledge complete and accurate. I understand that City of Corner Brook will contact the reference for additional information if required. I understand that approval of an attendant pass is given only if an acceptable reference is given and this form is complete fully.

Signature of applicant (Required): \_\_\_\_\_

*A guardian/caregiver may sign if the applicant is under the age of 18 OR is of legal age and unable to sign*

Date (Required): \_\_\_\_\_

### **Privacy Notice (ATTIPPA, 2015)**

*Personal information on this form is collected in compliance with the Access to Information and Protection of Privacy Act, 2015 , and will be used by authorized staff only to process your attendant pass application. This information is not disclosed to other public bodies or individuals except as authorized by ATIPPA, 2015.*