**Access Needs Form**

Please select any access needs that you have:

* Auslan interpreting
* Automatic captioning
* Live captions (instead of automatic captions)
* Breaks
* Avoid seizure inducting imagery or content
* I will have a support worker or carer with me
* Audio Descriptions
* Other
* Please describe
* None of the above

Please let us know any additional information about your access needs: