



"We exist to provide outstanding opportunities through recreation for children and adults with disabilities."

NWSRA ADA Complaint Form

Section I: Complainant Information

Name: _____

Address: _____

City/State/ZIP: _____

Phone: _____

Email: _____

Section II: Filing on Behalf of Someone Else

Are you filing this complaint on your own behalf? ☐ Yes ☐ No

If no, provide:

Name of the authorized person on whose behalf you are filing: _____

Address: _____

City/State/ZIP: _____

Phone: _____

Email: _____

Relationship: _____

Permission obtained? ☐ Yes ☐ No

Section III: Complaint Details

Type of Grievance (check all that apply):

____ Accommodation Request

____ Program/Service

____ Facility/Accessibility

____ Other (if other, please explain):

An extension of the local park districts serving

Arlington Heights • Bartlett • Buffalo Grove • Elk Grove • Hanover Park • Hoffman Estates • Inverness • Mount Prospect
Palatine • Prospect Heights • River Trails • Rolling Meadows • Salt Creek • Schaumburg • South Barrington • Streamwood • Wheeling

3000 West Central Road, Suite 205 • Rolling Meadows, IL 60008 • VOICE 847/392-2848 • FAX 392-2870 • TTY 392-2855 • www.nwsra.org



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Please describe the incident/complaint with enough detail so the nature of the grievance can be understood. Add additional pages is necessary.

Date(s) and Time(s) of incident(s): _____

Location/Facility: _____

Description of what happened:

Names and contact info of individuals involved (if known):

Section V: Resolution Requested

What outcome or accommodation are you seeking?



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Signature: _____ Date: _____

Attach additional pages as necessary. If you need assistance, require an accessible format or language, or have questions about this form, please contact the ADA Compliance Officer.

Submit to:

ADA Compliance Officer: Rachel Hubsch or Andrea Griffin
Northwest Special Recreation Association
3000 W. Central Rd., Suite 205
Rolling Meadows, IL 60008
Phone: 847-392-2848

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