

ACCESSIBILITY FEEDBACK FORM

Your comments are important to us because we want to make sure your experience with The Centre for Family Medicine is the best it can be.

Building Visited:

- 10B Victoria Street
- 25 Joseph Street
- 250 Laurelwood Drive
- Wellesley

Date of Visit: _____ **Time of Visit:** _____

Was the service provided to you in an accessible manner?

- Yes
- Somewhat
- No

Comments:

What could CFFM do to make it easier for you to access our services?

Comments:

Additional Comments:

Would you like to be contacted?

- No, I do not need to be contacted.
- Yes, please contact me by: Mail Phone e-Mail

Complete only if you wish to be contacted:

Name:

Address:

Phone Number:

E-Mail: