

Accessibility for Ontarians with Disabilities Act (AODA) – Customer Service Standards Feedback Form

Thank you for visiting the Canadian Hearing Society. We value all of our customers and strive to meet everyone's needs. We recognize that receiving feedback provides a valuable opportunity to learn and improve.

Date of Visit: _____

Time of Visit: _____

Did we respond to your customer service needs?

Yes

No

If no, please explain:

Optional Information: *(Complete this section only if you wish to be contacted)*

Telephone (call): _____

Telephone (text): _____

TTY: _____

Skype: _____

Email: _____

Address: _____

City: _____

Province: _____

Postal Code: _____

Submit completed form to: Canadian Hearing Society; 271 Spadina Road; Toronto, ON; M5R2V3