



## Accessibility Request Form for Documents in Alternate Formats

### Personal Information (please print)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

### Document Information

Document requested in alternate format: \_\_\_\_\_

Which format would you prefer? (please check appropriate box)

Large Print

Preferred font size: \_\_\_\_\_

Preferred font style: \_\_\_\_\_

Audio;

Electronic (Microsoft Word or PDF);

Sign Language;

Other: \_\_\_\_\_

\_\_\_\_\_  
Signature (please sign this form)

\_\_\_\_\_  
Date

Personal information on this form is being collected under the authority of section 12 of the Integrated Accessibility Standards, Ontario Regulation 191/11 under the Accessibility for Ontarians with Disabilities Act, 2005, and will be used to provide accessible formats and communication supports upon request.

Please email the Request for Alternate Formats Form to us at [info@mahc.ca](mailto:info@mahc.ca) or send by fax to 705-789-0557 or 705-645-4594.