

# **Thames Centre Accessibility Feedback Form**

**Name**

**Do you wish to be contacted?**

Yes

No

**Address**

**Preferred method of Communication**

**Telephone**

**Involved Location or Department**

**Email**

**Feedback: (this may include barriers, suggestions on services, information requests or other accessibility issues)**

**Please direct all forms and inquiries to:  
Municipality of Thames Centre  
Attn: Clerk  
4305 Hamilton Road, Dorchester ON N0L 1G3  
Phone: 519-268-7334  
Fax: 519-268-3928  
clerk@thamescentre.on.ca**