



Complaint Form

Do you want to file a complaint about the Accompagnement loisir card?

Your opinion is important to ensure the smooth operation of the card. Make sure to answer each question on the form correctly.

The Association québécoise pour le loisir des personnes handicapées (AQLPH) reserves the right to contact you by phone or e-mail, within a maximum of 31 calendar days of receiving your complaint form.

Please download, complete and send the form to the following address:

Association québécoise pour le loisir des personnes handicapées
858, rue Laviolette
Trois-Rivières (Québec) G9A 5J1

Confidentiality of Information

The personal information you provide us is confidential.



www.carteloisir.ca

1-833-693-2253
cal@aqlph.qc.ca



Complaint Form

Step 1: On whose behalf are you filing a complaint?

Select one of the following four options:

- ☐ I'm filing a complaint for myself.

Name of person: _____

Card number: _____

- ☐ I'm filing a complaint on behalf of another person.

Name of the person: _____

Card number: _____

- ☐ I am filing a complaint for a partner organization (company, organization).

Organization Name: _____

- ☐ I am filing a complaint for a group or association.

Name of the group or association: _____

Step 2: Complaint Summary

Indicate the elements that led you to file a complaint.

Step 3: Contact information

First Name: _____ Last name: _____

Phone number: _____

Email address: _____

This address will be used to process your request.

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