



YES, I would like our service to be included in the:

DIRECTORY OF SERVICES OFFERED TO PERSONS WITH DISABILITIES IN NEW BRUNSWICK

NAME OF ORGANIZATION: _____

CONTACT PERSON: _____

ADDRESS: _____

_____ POSTAL CODE: _____

TELEPHONE: _____ FAX: _____

E-MAIL: _____ WEBSITE: _____

Please give a concise description of the service you offer to persons with disabilities in the province of New Brunswick:

(If you would like a more detailed listing, please feel free to attach a sheet to this form. We do reserve the right to edit!)

Do you have staff/volunteers available to visit schools and business, to conduct workshops and do presentations? YES NO

Please indicate if you have a resource library. YES NO

Services are available in: ENGLISH FRENCH

Form completed by: _____ Date: _____

Please return this form to : Premier's Council on the Status of Disabled Persons
440 King Street, Suite 648
Fredericton, N.B. E3B 5H8
Toll-Free : 1-800-442-4412
Fax : (506) 444-3001
E-mail : pcsdp@gnb.ca
Website: www.gnb.ca/council