



Tell Us What You Think Form

Do you have a compliment, or suggestion for us?

Your feedback can help us improve. If you have a complaint, please request a Complaints Form.

Tell us what you think about MHCN and our programs and projects.



Mental Health Carers NSW

Are you a:

 Carer Consumer Staff Member Working for an organisation Other

My details

Name: (optional) _____

Date: _____

Phone Number: (optional) _____

Email address: (optional) _____

Please call me so I can give you more information.

I would like a response to my feedback.

When you have completed this form, please provide it to:

- A staff member, or
- Post it to us at Building C, Suite 2.02, 33 Saunders St, Pyrmont NSW 2009, or
- Email it to us at MHCNadmin@mentalhealthcarersnsw.org