

SHARE & CARE

THE RECOVERY OF HOPE ~ THE HOPE OF RECOVERY

AMI-QUEBEC'S ANNUAL MENTAL HEALTH FORUM

Is the current mental health ideology compromising the health of our younger generations?

(Formerly the Low-Beer Memorial Lecture)

Thursday, November 13th, 7pm

In person at the Oscar Peterson Concert Hall, 7141 Sherbrooke West, Montreal and online at amiquebec.org/forum

More and more people are being diagnosed with mental disorders. Young people are being medicalized for behaviours that might be explained as entirely normal in other parts of the world. Distress has been commodified over many decades by pharmaceutical companies, the media and the psychiatric establishment. So how can we know when distress is normal and when it is something that needs to be treated?

At AMI's Annual Mental Health Forum, Dr. Sami Timimi will explore the political and cultural context of these phenomena and will present, instead, a deeply humane approach that looks at the person as a whole – their family context, their culture, their personal resilience – and advocates



for a reframing of how we think about and treat distress.

Dr. Sami Timimi is a Consultant Child and Adolescent Psychiatrist in the National Health Service in Lincolnshire, UK. He writes from a critical psychiatry perspective on topics relating to mental health and childhood and has published over a hundred and fifty articles in mainstream medical, educational, and sociological journals. He has written 40 book chapters, mainly in

academic books, on subjects related to critical psychiatry, childhood, psychotherapy, depression, behavioural problems and cross-cultural psychiatry, and is the author of seven books, the most recent of which is *Searching for Normal: A New Approach to Understanding Mental Health, Distress and Neurodiversity*. □



Our team's annual potluck! It's always a great lead-in to summer. We ate too much delicious food and laughed a lot.

Why isn't therapy WORKING FOR ME?

There are lots of good reasons to try therapy. If you're struggling with your mental health, therapy could be an excellent way to work through feelings, have an emotional outlet, and feel heard. This applies to family caregivers too—it's essential to take breaks, feel supported, and have someone to talk to. But what if you are already in therapy, and you feel like it's not helping? Here are some possible reasons to explore.

You and your therapist haven't established any goals

What are you expecting to get out of therapy? Are you waiting for your therapist to "fix" or "cure" your problem? It's important to set concrete goals so you both know what you are working towards. If there are milestones to aim for, you will be better able to track your progress. Talk to your therapist about where you want to be and how you could possibly get there.

Your expectations are unrealistic

We've all seen movies and TV shows where a therapist fixes everything in only one session, or the main character has a huge epiphany in therapy that completely changes their life. The truth is that therapy takes time and effort, and there's no quick fix. Results aren't instant. You need to work together to help you establish and make healthy changes.

You're in the wrong type of therapy

There are many, many different types of therapy. You need to find one that will help you. When you select a

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A FRIENDLY PLACE FOR SELF-CARE AND GOOD TIMES

AMI's Well Nest

During the past year, we've been working on a new pilot idea, one that we chose to call *Well Nest*. The goal of Well Nest is simple: making self-care look easy and accessible! It is dedicated to carers that accept to be cared for, and not in our usual way. In addition to our other programs, our aim with Well Nest is to offer space with a community who understands the realities of navigating mental health,

without having to talk about it.

Being continuously attentive to, and inspired by, the evolving services in mental health in our community, it was time for us to get this up and running. On July 10th, we had our first event, which consisted of lemonade, snacks, a record player, some good ol' vinyls, and free books, records, and clothes in a cozy living room atmosphere, but most importantly, it was where peers came together. We were so moved to see each person file into Well Nest that evening! It became very clear to us that this was going to be something special. We are so grateful and wish to thank all those who showed up and made this first event so lovely, warm, and comforting.

Note: if you do not identify as a carer, or caregiver, but you are a part of the AMI-Quebec community and participate in our programs, Well Nest is for you too, and you're welcome to join us! ☐



Mark your calendars!

AMI-Quebec is very happy to announce that there will be two more Well Nest events taking place before the end of the year! You can expect smiles, laughs, good conversations, and, we hope, 'a lightness of being'.

A vibrant 'Communal Painting' event with mocktails and colorful appetizers

Thursday, October 9th
from 5-7pm

A cozy wintery 'Game Night' with hot chocolate and popcorn!

Thursday, December 4th
from 5-7pm

We look forward to seeing you there, and can't wait to continue to develop Well Nest together.

Visit amiquebec.org/well-nest for details.

Therapy... continued from page 1

therapist, you are also choosing the approaches they use. If you are seeing someone and you don't feel their methods are helpful to you, it can give you the impression that all therapies are useless.

You aren't committed to the process

Therapy is hard work! Patience and commitment is essential. Going inconsistently, or once in a while, won't get you very far. You need to maintain momentum and put in the effort for it to be effective.

You and your therapist aren't a good match

Sometimes personalities clash. Therapy only works if you feel comfortable, safe, and able to open up without feeling judged. Would you respond better to someone calm and reassuring, or to someone more direct who will challenge you? Does the therapist have experience working with clients like you? If you don't feel any connection to your therapist, it might mean this relationship isn't a good match. The 'Therapeutic Alliance' (which means the relationship of trust and collaboration between a therapist and their client) is considered the most important predictor of successful therapy, even more than the selected type of therapy.

You believe you know better than your therapist

You know yourself better than anyone, so why can't you fix

what's wrong by yourself? The hard truth is that if that were the case, you would have done it by now. Therapists are professionals with training and knowledge that can help you. However, if you constantly think or feel you know better than your therapist, or that they are wrong, it might be time to find someone else.

You are resisting

Being honest and vulnerable can be scary. You could be fighting the process without even realizing it. Maybe there are feelings holding you back: anxiety, fear of rejection or judgement, or a reluctance to face difficult emotions. Sometimes we are so used to feeling a certain way that it's hard to change, even if it would be for the better. And if we're "unwell", maybe that helps us avoid dealing with tough things, putting it off until we're "better". Your therapist can only help you if you're honest, communicate, and are open to the process.

Don't give up! Therapy doesn't work right away, and sometimes we need to change our way of thinking or try different therapists or methods. The important thing is to find what works best for you. ☐

– Emily Verrall

Visit amiquebec.org/therapy for free and low-cost therapy options.

Visit amiquebec.org/sources for references

Therapies using art can offer an opportunity to explore our emotional wellbeing and healing through creative expression. Art therapy is the application of any type of visual or artistic medium in therapeutic contexts that allows individuals to

GET CREATIVE! ALL ABOUT ART THERAPY

express their emotions, foster self-awareness and self-worth, and decrease stress and anxiety. It can include drawing, painting, colouring, dance, music, or theatre, and allows people to address difficult situations in their lives in a way that can feel more comfortable than at the therapist's office. You can choose the type of art or process that works best for you, and can do it at your own pace—even from the comfort of your own home. While some benefit from having a licensed art therapist guide them, others can find healing and growth on their own if they apply it to their daily routine.

Art therapy holds many benefits. It can help reduce stress, depression or anxiety, it can stimulate mental function and awareness, enhance quality of life, and help to bring joy and peace to people's daily lives. Art therapies can offer opportunities to have a safe outlet to relive, relieve, or overcome emotions; have a sense of control over one's life, and get in touch with oneself. There is no one-size-fits-all method to taking care of one's mental and emotional health, and so picking up a paintbrush or joining a dance class can be a wonderful step in your mental health journey—and in any case, you can get a good laugh or hobby out of it!

However, there can be some challenges buying into art therapy. Some may find it silly or shameful at first to engage in art or play therapy as an adult, and the social stigma around it can be heavy enough for them to be resistant to it. Moreover, the lack of rigid, controlled process around art therapy can make it feel like there's no progress in one's healing or that there's a lack of validity in the therapy overall. Lastly, like any type of therapy, it can be costly both in time and money.

We've got two creative workshops for family carers coming up this fall! They will offer a space to explore emotions and experiences openly, comfortably, and in a fun and creative way. □

Express Yourself! starts on October 14
(Details: amiquebec.org/express)

Write From Your Heart starts on October 16
(Details: amiquebec.org/writing)

– Nazila Toloeei

Visit amiquebec.org/sources for references

THE RECOVERY TRANSITION PROGRAM

Awarding Peer Mentors for their dedication

On June 17, 2025, one of AMI's yearly awards was given to members of the Recovery Transition Program (RTP). How did this happen?

The RTP was a peer-mentoring program at the McGill University Health Centre that included a book club, talent shows, a workshop series, and a regular magazine publishing art, stories, poems and journalism, all run by the patients themselves. It offered a tremendous record of healing for people suffering from everything from addictions to schizophrenia. The research program was suddenly closed in August 2024 after eight years by new administrative directives.

AMI's Executive Director, Ella Amir, was familiar with the RTP from the beginning, when her expertise was sought before we started to offer programs to families. Ella and Patricia Lucas, who was the Coordinator of the RTP, both sat on the Quality Assurance Committee of the MUHC Mental Health Mission. One of the agenda items was whether a peer mentor caring for a family member could be used in the emergency service to help family members waiting there.

When the closure of the RTP was announced, one of our peer mentors alerted Ella and Loreen Pindera (an AMI board member) who galloped to our defence, notifying the press and showering us with encouragement and support. When Ella learned that some of our RTP group were looking to find another home, she immediately consulted with her links in the community, and made initial contacts, including with Dunham House. We are now beginning a pilot project with Dunham House to mentor four or five clients, and then plan to expand the program.

Even though AMI's main mandate is supporting families, the interest in peer mentoring is actually the foundation of the organization. It arose from families seeking other families for support and understanding. It has been so helpful to our group that Ella has seen, identified, and nurtured the key element that moves us forward. That element is the value of belonging to a community. What a gift! The special Award for Exemplary Service has added more wind to our sails. It was also heartening to meet and speak with AMI members and hear their inspirational stories. Our deepest thanks. □

– Jean Enright for the Dunham House Recovery Transition Program Tea

Our weekly walking group takes place every Tuesday at 4:30pm! It's welcoming and accessible for everyone—good for both your mental and physical health. Visit amiquebec.org/walk for details.



Welcome to another edition of Myth Busters, where our aim is to dispel common myths associated with different mental illnesses. This time, we will be tackling anxiety.

MYTH 1: Everyone deals with anxiety, so anxiety disorders are not a real thing

There is a distinct difference between experiencing normal anxiety (that can be experienced during tough times, like a stressful time at work, a new chapter in life, or illness or death in the family) compared with a condition that can be described as anxiety disorder. Anxiety disorder disrupts everyday life and affects one’s daily functioning. We can all experience stress and anxiety from time to time, but we usually bounce back. Someone with an anxiety disorder continues to feel anxious even if there is no stressor. It is like a person experiencing a “fight or flight” sensation without any apparent danger.

MYTH 2: Constant reassurance is what is needed for someone with anxiety

Although reassurance can help soothe the worries of a person with anxiety, it is

not a cure-all solution. If an anxious individual is constantly reassured and always told that everything is going to be okay, then they may fall into a pattern of avoiding the things that make them anxious. Family members and loved ones can certainly reassure their loved one, but not to the point that it becomes a crutch for the anxious person. Instead, they can give unconditional love and support.

MYTH 3: Someone with anxiety is just neurotic

Calling a person who lives with anxiety neurotic is treating their anxiety as a character trait rather than what it actually is: a mental health challenge. An anxiety disorder is a very real thing that can affect an individual’s life. Recognizing that can help you understand the anxious person, so they can feel heard and understood rather than feeling judged.

Myth Busters

ANXIETY DISORDER

MYTH 4: Those with anxiety need to avoid any stressful situations

This can cause more harm than good. Avoiding situations because they might cause stress can cause even more anxiety in the long run; it can be a vicious circle. For example, if a person living with anxiety stays home to avoid potentially anxious situations, this can make it difficult to ever leave the house, which can lead to avoiding anything that is outside their comfort zone.

MYTH 5: There are no connections between anxiety and depression

According to the Anxiety & Depression Association of America, about half of people with anxiety also live with depression. The Mayo Clinic further explains that although anxiety and depression are different conditions, it is common for them to happen at the same time. One does not necessarily cause the other, but for some people a depressive episode can lead to developing an anxiety disorder, and some who live with anxiety can develop symptoms of depression.

MYTH 6: Anxiety can be cured with healthy habits and relaxation

Even though healthy habits and relaxation can benefit an individual who lives with an anxiety disorder, by themselves they are not a miracle cure. Many people with anxiety benefit from help from different therapies such as talk therapy or Cognitive Behavioural Therapy (CBT), as well as certain medications prescribed by a licensed professional. Different treatments work for different people. □

Find help for anxiety:
amiquebec.org/anxiety

– Gabrielle Lesage

Visit amiquebec.org/sources for references

ANNOUNCING NEW WAYS TO HELP YOUNG CARERS AT AMI

A young carer is...

Someone aged 5-25 who is affected by or cares for a family member who has a chronic illness, disability, mental illness and/or problems related to old age or language barriers. These kinds of responsibilities can be tough at any age!

What we offer:

- Workshops (ages 5+)
- Individual support (ages 14 to 25)
- Recreation activities (ages 14 to 25)
- Information & resources for families (ages 5+)

Every young carer meets with us to find the programs that fit them best. Youth, parents or guardians, or professionals can sign up either online or by phone.

Visit amiquebec.org/youngcarers or call 514-486-1448 for more information or to sign up. □



Meet Tony, Oliver, and Val, our Young Carers team!

What You Need to Know About AMI-Québec’s Workshops

- AMI-Québec’s workshops will provide you with information and hands-on experience. They help participants find their strengths, reduce stress, and increase confidence.
- Workshops are for family and friends of people living with mental health challenges and illnesses except where otherwise indicated.
- Our workshops are interactive and space is limited, even online—this gives our facilitators the chance to personally address your questions and concerns.
- We aim for a balance between in-person (at our office in Montreal) and online (via Google Meet) workshops so that we can accommodate as many people as possible.
- Registration is required to attend a workshop, whether in-person or online. Workshops are not recorded.
- All our workshops are held in English and they are all free!

To register for a workshop, or to learn more, please visit amiquebec.org/workshops.

FALL WORKSHOPS

Our interactive workshops will provide you with information and hands-on experience. They will help reduce stress, find your strengths, and increase confidence. All are for family and friends of people living with mental illness only except where otherwise indicated.

In-person workshops

- Beading Workshop for Indigenous Youth
- Express Yourself!
- Loss & Grief Throughout Life
- Young Carers Workshops (ages 10-14)
- Hands On Practice for Challenging Situations
- Facing Psychosis in Your Loved One
- Regulating Emotions

Online workshops

- Caregiver Groups
- Introduction to Borderline Personality Disorder
- Boundaries & Setting Limits
- Meditation
- Write From Your Heart

For details and to register, visit amiquebec.org/workshops

FALL 2025

SUPPORT GROUPS

Mondays 6:30-8pm on Google Meet

For family, friends, and people with mental illness unless otherwise indicated.

For details visit amiquebec.org/support

ANXIETY/OCD

September 8; October 6; November 3; December 1

BIPOLAR DISORDER

September 8; October 6; November 3; December 1

DEPRESSION

September 15; October 20; November 10; December 8

HOARDING

September 29; October 27; November 24; December 15

QUEER GROUP

September 29; October 27; November 24; December 15

YOUNG ADULTS aged 18-35

September 15; October 20; November 10; December 8

FAMILY AND FRIENDS

for relatives and friends

September 8; October 6; November 3; December 1

BPD for relatives and friends

September 15; October 20; November 10; December 8

KALEIDOSCOPE for people living with mental illness

September 29; October 27; November 24; December 15

IN PERSON

SOUTH SHORE for relatives and friends

In person only at 91 Churchill Blvd, Greenfield Park

Mondays 6:30-8pm

September 8; October 6; November 10; December 8

Visit amiquebec.org/calendar for an always up-to-date version of our calendar.

THANK YOU, AMI-QUÉBEC!

My Story of Recovery

I was in my mid-twenties when I first found out I had a bipolar disorder. I was in shock and in complete denial. I had no idea about the spectrum of mental illness that existed; as a result, I was unable to reach out for help on my own. My mom had been confronting me about my escalating impulsivity and risky behaviour; I brushed it off as nothing for months.

At that time, I had gone through several difficult years, not having grieved the death of a close family member in a healthy manner. This also marked some out of character experimentation with pot and rash decision making. I had not gone through this in my teenage years. Now looking back, it seems that my depression was worsening, and instead of dealing with the problems at hand I was looking for an escape. I can really see that my greatest solace was in my writing; when I wrote diary entries regularly and dabbling with poetry and short stories, I had a better understanding of my emotions. This outlet gave me a say, an inner form of expression that was me, without any label of being 'bipolar'.

I did not know that I was losing touch with my sense of self, allowing intense emotions to guide me in a false direction. It wasn't just depression creeping through the cracks but overpowering thoughts invading my life daily. My parents and close family were deeply concerned until one day they decided to drag me to the ER where I finally got evaluated by a psychiatrist at the Royal Victoria Hospital.

By chance, during the several days I was held under observation at the psychiatric ward and received my bipolar diagnosis, a nurse told me about AMI-Quebec. I had discovered that there was an English organization which provided support and guidance to families. Suddenly there was a light amid the darkness and a pathway to health! The timing of discovering AMI was perfect as I attended a workshop immediately after I went home and felt much less isolated.

The AMI office had a library with greeting area, and a large room where families could discuss personal issues and get guidance. The low yearly fee to become a member was pocket change compared to the intense influence the organization would have on my current outlook and future life. Having heard the stories of other people living with bipolar, I recognized where stigma, fear and sadness lurked. AMI-Québec's guidance and information showed me a way to reach happiness. They helped clear the fog around my diagnosis, and taught me life skills, giving me tips and reminders to honour myself in the process of recovery. I felt at ease in this place of acceptance.

In the past two decades since I joined, it is safe to say I have maintained my sense of self and have begun feeling balanced and proud. Recently, I participated in one of AMI's support groups and found that I had something greater to offer:

my own experience on the road back to health. I felt the need to share and support newly diagnosed attendees. AMI opened the door to my growth, development, and identification as an adult with bipolar disorder. I could not have built a better voice to house my tumultuous emotions on my own; I developed the courage to ask for help from my family, professionals, and others. I could not have gotten to this point without you. Thank you, AMI-Québec! I owe my first steps of survival to you! ☐

– Roxanna Moscovitch

STAY INFORMED!

Find our most up-to-date information: amiquebec.org

For regular updates, follow [@amiquebec](https://www.instagram.com/amiquebec) everywhere you use social media



Sign up for our monthly emails: amiquebec.org/email

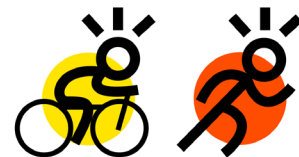
Or call us: **514-486-1448**
(1-877-303-0264 outside Montreal)

Join the Friends of AMI-Quebec team

On October 19 walk, run or bike to raise awareness about the important link between mental health and physical activity. It's the 3rd edition of the Head2Core at the Circuit Gilles Villeneuve. Sign up or make a donation at www.zeffy.com/en-CA/fundraising/friends-of-amiquebec

Find out more at Head2Core.org.

October 19th, 2025
Circuit Gilles Villeneuve



La Classique | 2025



Taylor Pettit has been one of our Family Peer Support workers for the past two-and-a-half years. She has left AMI, and at a celebratory lunch she shared a few words with us: "I've learned so much. I will miss you all." Thank you for everything, Taylor, we will miss you too!

DISORDER OR INJURY?

Arguments for and Against Changing the Name of PTSD

For the past decade there has been much debate on the name of Post Traumatic Stress Disorder (PTSD). Some say that we should keep it to PTSD, whereas others are saying we need to update and officially change the name to Post Traumatic Stress Injury (PTSI). We were interested in seeing arguments from both sides, and have compiled them in this article.

For Changing PTSD to PTSI

Some people are hoping to change the name of this disorder in order to eliminate the stigma that is sometimes associated with it. Those proposing changing the last word from Disorder to Injury say it can reframe the way post-traumatic stress is perceived. By calling it an injury, there is more emphasis on healing (with the right care) instead of a sentence to life with a disorder.

In the May 2023 edition of the *Cureus Academic Journal*, Dr. Eugene Lipov shared the findings of an anonymous survey that was sent to 3,000 adults who utilized the Stella Center, a mental health clinic in Chicago, Illinois. An additional 1,500 invitations were sent to those who visited the Center’s website. A total of 1,025 people answered the survey, and the results showed that two-thirds of the people who responded believed that changing the name from

PTSD to PTSI would reduce the stigma associated with PTSD. More than half of those who answered also confided that they would be more likely to feel comfortable seeking help if the name of PTSD changed.

ItsPTSI.com, a campaign aimed at having medical and government bodies recognize the condition as an injury rather than a disorder, explained that advanced imaging technology, such as fMRI and PET scans, can detect any physical changes to the brain after an individual experiences post-traumatic stress. They list a few findings in studies that show a physical alteration of spaces in the brain such as a reduction in volume of the hippocampus, changes in the structure of the amygdala, and alterations in the prefrontal cortex. The campaign believes that post-traumatic stress should be considered an injury because these changes to the brain are physical.

For Keeping the Name PTSD

An academic article from *The Journal of Military and Veterans’ Health* argues against the name change. They question it because other mental disorders (like social anxiety disorder, adjustment disorder, and major depressive disorder) do not have big debates about changing the name because of stigma. In their article, they explore a review, titled “The role and importance of the D in PTSD”, conducted by Fisher and Snell in 2013. In this review, the authors found no known studies that demonstrated that stigma of PTSD reduced the use of treatment for it. Fisher and Snell argue that naming PTSD as such provides a common language use that is understood by health and educational communities. Additionally, they argue that the word “disorder” implies that treatment can be beneficial. Lastly, they also say that a PTSD diagnosis from the *Diagnostic and Statistical Manual of Mental Disorders (DSM)* helps individuals like veterans receive benefits to help with the financial impact that the disorder can have.

Dr. Matthew Friedman, who in 2012



A July pizza party in the park with some of our volunteers and friends!

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TRIBUTES & MEMORIALS

In honour of Sylvia Itzhayek’s birthday

Naomi Blumer
Susan Kasner
Adele Marshall

In memory of Nicholas Collin Andrea and Bruce Thomas

In memory of Beppie Boudens- Alexander

Alexander J. Winslow

In memory of Carol Almond Carolyn Price

In memory of Matthew Lindy Valerie Ross

In memory of Irwin Rappaport
Norman Levi
Eva Marx
Sarah Marx

AMI-Québec extends sympathy to the bereaved and appreciation to all donors for their generosity.
If you wish to honour someone with a donation, please phone 514-486-1448 or visit amiquebec.org/donate.

amiquébec

Allié.e.s en santé mentale
Allies in mental health

AMI-Québec, a grassroots not-for-profit organization, is committed to helping carers* manage the effects of mental illness through support, education, guidance and advocacy. By promoting understanding, we work to dispel the stigma still surrounding mental illness, thereby helping to create communities that offer new hope for meaningful lives.

*Carers (*proches aidants*) are those in the circle of care, including family members and other significant people, who provide unpaid support to a person in need.

Perla Muyal, *President*
Norman Segalowitz, *Vice President*
Henry Olders, *Treasurer*
Sharleen Young, *Secretary*
Judy Gold, *Immediate Past President*
Ella Amir, *Executive Director*

SHARE & CARE

Share&Care is published quarterly.

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Liane Keightley, *Designer*

Articles and comments are invited. Anonymity will be respected if requested. Guest articles reflect the opinions of the authors and do not necessarily reflect the views of AMI-Québec.

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PTSD ... continued from page 7

was on the committee in charge of updating the trauma section of the DSM, says a name change like this would cause confusion. He believes the change would “tinker with a psychiatric diagnosis” and “would accomplish nothing positive”. When talking about military veterans, Dr. Friedman says that the military should provide more help to soldiers with PTSD rather than waste time on a name change. He applauded the way the Canadian military has aided their soldiers with PTSD through peer counselling and education campaigns. He also said this positive approach was done without changing PTSD to PTSD. He expressed that we should “keep the PTSD diagnostic term and have it regarded as an injury” rather than change its name. ☐

– Gabrielle Lesage

What do you think? Should PTSD be changed to PTSD? Do you think it will encourage people to seek the help they need? Email info@amiquebec.org with your thoughts.

Find help: amiquebec.org/PTSD

Visit amiquebec.org/sources for references

This issue of Share&Care has been made possible by a grant from the Otsuka-Lundbeck Alliance.



YOUR SUPPORT SUSTAINS OUR FREE PROGRAMS

Although AMI receives some government funding, we work hard to raise more than half of our operating budget each year.

Thank you for your support!

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