

[2020 Mental Health Month Toolkit](#)

The 2020 Mental Health Month toolkit is ready! Please fill out the form below to gain access.

Bookmark the link for the following page so you can return as needed without re-completing the form.

First Name

Last Name

Title

Organization

Email

| | |
|---------------------------------------|---------------------------------------|
| Location | <input type="text"/> |
| State/Province (If located in the US) | <input type="text" value="- None -"/> |
| Country | <input type="text" value="- None -"/> |

| | |
|---|----------------------|
| Are you interested in receiving MHA emails? | <input type="text"/> |
| <input type="radio"/> Yes | |
| <input type="radio"/> No | |