



Member or Customer Feedback Form

Attention: General Manager,

We would like to bring to your attention the following incident, official(s) / staff, which we believe impeded our enjoyment at the venue and or activity under your control.

Name of person completing report: _____

Your role: Player, Coach, Referee, Parent, Spectator, Staff member, Official

Date of incident: _____ Time of Incident: _____

Your Team: _____ Opposition: _____

Officials: _____ and _____

Describe in detail the circumstances which caused you to fill in this form:

What is your suggested remedy?

Note it is our policy to acknowledge receipt of this form by return and endeavour to have a written response to you within 7 days. The details of your correspondence will not be made public without your consent; however this may be required in order to resolve a dispute of fact or circumstance.

Official Use Only

Received by:		Date	
Actioned by:		Date	
Report Required Y/N		Date Requested	
Further Action Y/N by:		Date	
Reply by: (Attached)		Date	