**Club Complaint Form Template – *INSERT CLUB NAME***

Please complete all sections of this form where possible. Thank you.

1. **Your Details**

|  |  |
| --- | --- |
| First Name, Surname |  |
| Full Address |  |
| Email Address |  |
| Contact Number/s |  |

1. **What is your connection to the Club PLEASE TICK?**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Athlete | Volunteer | Family Member | Member of the public | Other  Please Specify |
|  |  |  |  |  |

1. **How would you like to be contacted?**

Phone Email Written correspondence

1. **What is your preferred time for contact:**

Morning Afternoon After 5pm Anytime

1. **Have you used the informal steps of this procedures first**?

Yes No

Please refer to the Club’s Complaints Policy for full details of the procedures.

1. **Please outline the Complaint, including dates and times of actions; and list your specific concerns (please use additional sheets if necessary)**

|  |
| --- |
|  |

1. **How would you like this complaint resolved?**

|  |
| --- |
|  |

Print Name ……………………………………...

Signed ……………………………………… Date \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_

**Forms can be returned via email to** [***INSERT***](mailto:feedback@specialolympics.ie) ***EMAIL* or addressed to the Club’s Complaint Administrator at *INSERT CORRESPONDENCE ADDRESS***