

Complaint Form

Complainant Information:

Name: _____

Gym: _____

Contact Number: _____

Email: _____

Complaint Details:

Accurately describe in detail the nature of your complaint (concern or conflict) including date(s) of occurrence and parties involved: (attach additional notes if needed)

Remedy:

Describe what actions you recommend in order to deal effectively with your complaint:

Provide suggestions for measures that can be taken to avoid a repeat of this complaint:

Signature of Complainant: _____ Date: _____

Complaint recorded by: _____ Date: _____