

Complaint Form

Your name: _____ Date: _____

Are you a (circle one): Client / Family member / Carer / Other (specify) _____

Please outline your complaint or feedback.

Do you wish action to be taken to resolve this? If so, please state the action you are seeking.

Please lodge this form either as a hard copy to Max Schollar-Root, or by email to thehillsmusictherapy@gmail.com. You can also make a complaint to the NDIS Commission by calling 1800 035 544 (9am-5pm, Mon-Fri in VIC) or by completing their complaint contact form, available via the NDIS Commission website: <https://www.ndiscommission.gov.au/>

Contact:

Email: thehillsmusictherapy@gmail.com

Phone: 0422 929 143