

Customer Complaint Form

Customer Name						
Phone						
Address						
Email Address						
Date of Complaint						
Who took the complaint details?						
Who will handle complaint?						
Describe the complaint Product/Service Problem/Fault						
First Response						
Suspected Cause						
What customer wants <ul style="list-style-type: none"> • Tick request remedy • Extra details 	Refund		Repair		Replacement	

Aquatics Manager/Trustee	To be completed by Aquatics Manager or Trustees					
Agreed solution <ul style="list-style-type: none"> • Tick requested remedy • Extra details, eg action required by business 	Refund		Repair		Replacement	
Corrective Action Person(s) <ul style="list-style-type: none"> • Senior Lifeguard • Swim coordinator, Manager • HR Committee, Lawyer 						
Corrective Action Followed up <ul style="list-style-type: none"> • Letter • In person • Scheduled meeting 						
What steps should be considered to avoid a repeat of the problem						
Complaint resolved	Date Signature					

This form can be given to Aquatics Manager or emailed to aquatics.manager@waisplash.org

or Tararua Aquatics Community Trust Secretary secretary@waisplash.org

If your complaint involved the Aquatics Manager please direct your complaint directly to the Trust Secretary secretary@waisplash.org