COMPLAINTS FORM
DOCUMENT CONTROL

Version	Amendment & Reviews	Approved by	Date
1	Document Collated	D Bruce	9/6/18
1.1	Document Reviewed by BOT	D Bruce	2/7/18
1.2	Reviewed by Staff	D Bruce	3/7/18
1.3	Logo change	D Bruce	10/09/2020
1.3	Reviewed	D Bruce	13/06/2024

- Fill in all details and post, email or hand deliver to Camp Columba office or Camp Manager

COLUMBA
CAMPS · SOUTHLAND

COMPLAINTS FORM

Please note as much detail as possible i.e. food related - note the meal item, date, time etc.

Group Name:	
Name of Complainant:	
Date:	
Contact No. / email:	

- ☐ **Buildings & Grounds**
- ☐ **Activity**
- ☐ **Kitchen**
- ☐ **Child Safety**
- ☐ **Other?** _____

Details of Complaint

Date incident occurred		**Time incident occurred**	

Who was involved?
What happened? **(think: environment > people > equipment)**
Where did it happen?
Why did it happen?
What could have been done to prevent it happening?

FOLLOW UP (Office use only)

Follow Up Form Attached ☐