

RECORD OF INFORMAL COMPLAINT

Name of person receiving complaint:			Date:	/	/
Complainant's Name:			<u>.I</u>		
Complainant's Age Group:	☐ Over 18 years old ☐ Under	18 years old			
Role/status in golf:	☐ Administrator (volunteer)	☐ Parent			
	☐ Athlete (player)	☐ Guardian			
	☐ Coach/Assistant Coach	☐ Spectator			
	☐ Employee (paid)	☐ Support Personnel			
	□ Official	☐ Other:			
When/where did the incident take place?		<u> </u>			
What is the nature of the	☐ Harassment OR	☐ Discrimination			
complaint? (category/basis/grounds)	☐ Sexual/Sexist	☐ Sexuality			
Tick more than one box that applies.	□ Race	☐ Bullying			
	☐ Religion	☐ Verbal Abuse			
	☐ Pregnancy	☐ Physical Abuse			
	☐ Disability	☐ Victimisation			
	☐ Child Abuse	□ Other:			
What are the facts relating to the incident, as stated by the Complainant?					

What does the Complainant want	
to happen to resolve the issue?	
to happen to reserve the locae,	
What other information has the	
Complainant provided?	
What is the Complainant going to	
do now?	
do now.	

This record and any notes must be kept in a confidential and safe place. If the issue becomes a formal complaint, this record is to be sent to Operations Manager Greg Ferguson at Operations.Manager@mdclubs.com.au