HALTON FARNWORTH HORNETS ARLFC





I WISH TO INFORM THE HFH CLUB ABOU	T A (please tic	k a box) NO	T for SAFEGU	ARDING ISSUES	3	
Complaint Compliment		Comment				
CONTACT INFORMATION				YES	NO	
Are you completing this form on behalf of somebody else?						
Your Full Name:						
Your Address:		<u> </u>				
		Post Code:				
Your Phone No:		Mobile No:				
Your Email Address:						
IF YOU ANSWERED 'YES' ABOVE, PLEASE COMPLETE THIS SECTION FOR THE INFORMANT:						
Their Full Name:						
Their Address		T				
Post Code:						
Their Phone No: Their Mobile No:						
Their Email Address:						
Case/File No if Relevant			HFH No:			
Are you making a COMPLAINT ? Yes the HFH Club, who did you contact a		If Yes, and	you have alr	eady contacte	ed	
If you answered Yes to the above qu	estion, pleas		to say how y		the HFH Club	
Telephone Letter		Email		In Person		
Have you spoken to a HFH Exective Team Member about this matter YES NO						
If Yes please record the name of that person:						
Please provide details of the Complaint, Compliment, Comment you wish to make						
If you are making a Complaint, wha	t action woul	ld you recom	ment to the	HFH Club/Exe	ecutive Team	
in order to corrective action?						
Please return	this complet	ed form to th	ne Club Secre	rtary		

The HFH Club will aim to respond to any Complaint within a twenty working day time frame.