# **NZYF Complaints Form**

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| **Your Contact details** |
| Your full name: |  |  |  |
| Phone number: |  | Email: |  |
| Address: |  |  |  |
| Affiliation (Club/Organisation): |  |  |  |
|  |  |  |  |
| **If you are making a complaint for someone else:** |
| Name of person complaining on behalf of: |
| Contact details of person complaining on behalf of:Do you have their consent?: Yes / No *(please circle)* |
| **Details of the individual the complaint is about:** |
| Full name of the person: |  |  |
| Club/Organisation they belong to:  |  |  |

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| **Nature of complaint:** |
| Date(s) of incident(s): |  |
| Location(s) of incident(s): |  |
| Description of incident(s)/complaint:  |  |
| Where would you like the complaint submitted to? | My Regional Chair / NZYF National Office / NZYF Board Chairperson |

***Once the form is completed, please submit to*** ***membership@youngfarmers.co.nz******. Please note that your complaint will be kept confidential and the strict NZYF complaints process will be followed.***