

Compliment and Suggestion Form

Part A - About me

Personal Details

Full Name: Click here to enter text

Are you providing this Feedback on behalf of someone else? Choose an item.

Whose behalf are you providing this Feedback? Click here to enter text.

Is this a Compliment or a Suggestion? Choose an item.

Contact Details

Mobile: Click here to enter text.

Email: Click here to enter text.

Organisation: Click here to enter text.

Postal Address: Click here to enter text.

My preferred contact is: Choose an item.

Part B – Your Compliment or Suggestion

What is your compliment or suggestion?

Provide sufficient details in order for No Limits to understand and act on your feedback.

Click here to enter text.

Part C – If this is a Compliment, who is it for?

Name of the person you are providing the compliment

Name of person? [Click here to enter text.](#)

What is this person's relationship to you? [Click here to enter text.](#)

Part D – If this is a Suggestion, what outcomes are you seeking?

What outcomes are you seeking?

[Click here to enter text.](#)

Email your form to: feedback@nolimitscommunity.org or post to No Limits Community Services, Level 1, The Greenhouse, 797 Plenty Road, South Morang, Melbourne Victoria 3752