MALANDA PASTORAL, AGRICULTURE AND INDUSTRIAL SOCIETY INC

GRIEVANCE & COMPLAINT FORM

Use this form to report concerns about conduct, safety, decisions, activities or services connected with the Malanda Show Society. Complete the sections relevant to your concern and attach extra pages if needed.

IMPORTANT: A formal competition result or award protest must be made on the separate Competition Protest Form and follow applicable deadlines. This form does not replace that process. If there is immediate danger, contact emergency services or the relevant authority first.

1 Person making the complaint/grievance

Full name: _____

Contact telephone: _____ Email address: _____

Postal address (optional): _____

_____

Your involvement (tick all that apply):

☐ Member ☐ Volunteer ☐ Exhibitor ☐ Judge/steward ☐ Employee ☐ Patron/visitor

☐ Contractor/vendor ☐ Entertainer ☐ Parent/guardian

☐ Other (Please specify): _____

Preferred contact method: ☐ Email ☐ Telephone ☐ Post

Safe time/way to contact: _____

2 Overview of the complaint/grievance

Category (tick all that apply):

☐ Conduct/disrespect ☐ Bullying/harassment ☐ Physical contact ☐ Personal welfare

☐ Health & safety ☐ Animal welfare ☐ Biosecurity ☐ Theft/property misuse

☐ Facilities/equipment defect ☐ Alleged breach of Show rules ☐ Service/decision

☐ Other (please specify): _____

Date(s) and approximate time(s) of incident/complaint: _____

Location, event or Show section involved: _____

Person(s) or position(s) involved (if known): _____

3 Description of the complaint/grievance

Explain what happened in your own words, including dates, approximate times, relevant actions or statements, and how you or others were affected. Identify people involved where known. Use additional pages if needed.

Detailed account

4 Urgency and immediate risks

Does this matter involve a current or immediate safety, child safety, animal welfare, biosecurity or other serious risk?

☐ No ☐ Yes ☐ Unsure

If yes or unsure, describe the risk, who may be affected and any immediate action needed or already taken.

5 Witnesses and supporting information

Witnesses or other people who may have relevant information (names and contact details, if known):

Evidence available (tick all that apply):

☐ Photographs/video ☐ Messages/emails ☐ Documents/records ☐ Other ☐ None

List attachments, documents or other evidence and where they can be found.

6 Steps already taken

Have you raised or tried to resolve the concern previously? If yes, explain who you contacted, when and what happened. You may leave this blank if direct discussion was unsafe or inappropriate.

Previous action or attempted resolution

7 Requested outcome

What action would you like the Society to consider? For example, an explanation, correction, facilitated discussion, safety measure, review of conduct or change to a process. Requested outcomes cannot be guaranteed.

Outcome or action sought

8 Other information, declaration and consent

Any further information the Society should consider (optional)

Declaration

I confirm that the information provided is true and accurate to the best of my knowledge. I understand that relevant information may need to be shared with people responsible for receiving, assessing, investigating or responding to this concern, subject to applicable confidentiality and legal requirements.

Signature (or typed name, if submitted electronically): _____ Date: _____

If completing on behalf of another person, state your relationship and authority to act:

9 How to submit

Submit the completed form to the Malanda Show Manager. If the complaint concerns the Show Manager, submit the form directly to the Malanda Show Society President instead.

Email: info@malandashow.com.au | Telephone: 0447 965 500

Please check the current Grievance & Complaints Policy and Procedure for how concerns are handled. Any applicable reporting or response timeframes are governed by those documents, not this form. Keep a copy of the completed form and attachments.

10 Society use only — confidential

Date received: _____ Received by: _____

Reference number: _____ Acknowledged on: _____

Classification: ☐ General complaint ☐ Member/constitutional grievance ☐ Urgent referral

☐ Potential competition protest — refer to separate procedure

☐ Other (please specify): _____

Initial risk assessment/immediate safeguards/conflict-of-interest check:

Officer assigned, next action / referral and target update date:

Records management: restrict access to authorised people, store attachments securely, and follow applicable retention and privacy requirements.