



Feedback Form

Name: _____

Address: _____

Telephone: _____ Email: _____

Please provide detail on the service or decision you would like us to consider:

Would you like CHC to arrange an interpreter?

Yes No Language: _____

Please send your Feedback Form to:

Mail: CHC, PO Box 6239, O'Connor 2602

Email: feedback@chcaustralia.com.au