Thriving Lives Co.
Empowering our community to live a life they love.

Complaints and Feedback Form

At Thriving Lives Co., we value your feedback and take any concerns you may have seriously. Please fill out this form if you have any complaints or feedback about our services, team members, or facilities.

Client Details
Name:

Address:

Phone Number:

Email:

Details of the Complaint or Feedback
Date of Incident:

Time of Incident:

Location of Incident:

Name of Team Member(s) Involved:

Brief Description of Incident:

Please describe your complaint or feedback in detail:

Phone (07) 4065 8000
Fax (07) 3539 9821
Email info@thrivinglives.com.au
Address 208 Buchan St, Bungalow QLD 4870

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What outcome would you like to see as a result of your complaint or feedback?

Would you like to be contacted regarding your complaint or feedback? If so, please indicate your preferred method of contact (phone, email, mail):
[ ] Phone [ ] Email [ ] Mail

Please return this physical form to the receptionist, email it to info@thrivinglives.com.au, or mail it to the following address:

Thriving Lives Co.
PO Box 687
Cairns, QLD, 4870

Thank you for taking the time to provide us with your feedback. We appreciate your input and will do our best to address any concerns you may have.

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