



**Contestant Suggestion Form**

**Contest Grievance Form**

Please check one of the above

Name: \_\_\_\_\_

Business Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Suggestion or Grievance (circle one) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Class: \_\_\_\_\_ Judge: \_\_\_\_\_

Grievances should be verbally brought to the attention of the Contest Coordinator stationed at the check-in table located in front of to the contest ring. If the complaint cannot be resolved immediately, then a formal grievance must be presented in writing using this form.

I, the **Contest Coordinator** have spoken with the above-named person and the complaint was not able to be resolved on site.  
Signature: \_\_\_\_\_

**Grievances will not be accepted after the close of the show.**

By my signature, I am hereby stating that the information provided is true and accurate.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_