



McLEAN
SWIMMING
AND TENNIS
ASSOCIATION

SUGGESTION / CONCERN FORM

WHAT CAN WE DO DIFFERENTLY?

WHAT CAN WE DO BETTER?

HOW CAN WE BEST SERVE YOU?

THIS IS YOUR CLUB AND WE WANT TO HEAR FROM YOU!

Originator of Suggestion or Concern:

Name: _____ Date: _____

Email: _____ Phone: _____

Please give a detailed description of the issue/concern, or state your suggestion:

FOR MSTA USE:

Received by: Name: _____ Date: _____

Reviewed by: Pool Manager on _____ MSTA Board Rep on _____

Full MSTA Board on _____ Outside agencies contacted on _____

Course of action taken _____

Further recommendations _____

FEEDBACK: Originator contacted on _____ by _____

Further comments _____

FOR MSTA BOARD USE: MSTA Committee(s) Affected:

Facilities Membership Social Tennis Swimming Other

**Return the completed form to the Marlin Front Desk, or mail to
MSTA • P.O. Box 391 • McLean, VA • 22101-5018**