



Association of Canadian Travel Agencies  
Association canadienne des agences de voyages

## ACTA Complaint Form

Passenger Names:		
Passenger Address:		
City:	Province:	Postal Code:
Home Phone:	Email Address:	

### Complaint Against

Company Name:		
Company Address:		
City:	Province:	Postal Code:
Phone Number:		
Travel Agent Name (If applicable)		
Destination:	Hotel:	
Departure Date:	Return Date:	
How was booking made:		

### Brief description of complaint:

### How can your complaint be resolved to your satisfaction?

Complaints must first be submitted to the travel agency in writing to try to resolve the issue. If you are unable to resolve the issue ACTA will review the file on your behalf if the travel agency is an ACTA member. Copies of pertinent supporting documents (airline ticket copies, credit card receipts, etc.) should be sent to ACTA. Do not send originals as ACTA cannot be responsible for safeguarding and returning all documentation. Retain your original documents in case they are required for legal or regulatory actions. Please note that ACTA provides informal mediation for travel-related disputes only. We are not a governmental or regulatory organization; we cannot impose penalties or fines on a member agency or force a member to refund money or to deliver compensation of any kind. However, ACTA will do our best to help to resolve disputes in ways that are fair to all parties.

#### ACTA National Office:

PO Box 12612, Martinway Plaza, Etobicoke, ON, M9R 4C7  
Tel.: (905) 282-9294 | Toll Free: (888) 257-2282 | Fax: (905) 282-9826  
Email: [memberservices@acta.ca](mailto:memberservices@acta.ca)

ACTA will address a complaint only after the consumer has made an attempt to resolve the matter directly with the travel agency and/or travel wholesaler.

#### Permission to share information

By signing this form, you are authorizing ACTA to share information contained in your complaint.  
ACTA is not empowered to compel any company to give redress or provide you with compensation.

\_\_\_\_\_  
(Today's Date)

\_\_\_\_\_  
(Your Signature)