

Salon and Spa Feedback Form

Thank you for visiting us today. Please share how your appointment went by filling the check-boxes completely with a blue or black pen. Your answers are anonymous.

Rate your visit

How satisfied were you with each part of your visit?

Please cross one in each line

Ease of booking

Waiting time

Your stylist or therapist

The result of your treatment

Cleanliness and atmosphere

Value for money

Very dissatisfied	Dissatisfied	Neutral	Satisfied	Very satisfied
☐	☐	☐	☐	☐
☐	☐	☐	☐	☐
☐	☐	☐	☐	☐
☐	☐	☐	☐	☐
☐	☐	☐	☐	☐
☐	☐	☐	☐	☐

Coming back

How likely are you to book with us again?

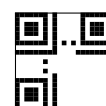
(Please cross one)

- ☐ Very likely
- ☐ Likely
- ☐ Neutral
- ☐ Unlikely
- ☐ Very unlikely

Any comments for your stylist or therapist?

Thank you for your feedback. Please hand this card to the front desk on your way out.

To respond ☒ or ☐



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