

# Salon and Spa Feedback Form

Thank you for visiting us today! Please take a moment to fill out this feedback form to help us improve our services. Since this is a printed template, please write your answers clearly in the spaces provided.

## 1. Customer Information

Full Name:

Date of Visit:

Phone Number:

Email Address:

Service(s) Received:

Stylist / Therapist Name:

## 2. Service Evaluation

Please rate the following aspects of your visit on a scale of 1 to 5 (1 = Poor, 5 = Excellent):

Overall Experience (1-5):

Cleanliness and Atmosphere (1-5):

Staff Friendliness and Professionalism (1-5):

Quality of Treatment / Service (1-5):

Value for Price (1-5):

## 3. Your Comments

What did you enjoy most about your visit?

How can we improve your experience for your next visit?

Would you recommend our salon/spa to others? (Yes / No):

Thank you for your valuable feedback! Please hand this completed form to the reception desk.