

Client Feedback Form

Organisation:
Event date:
Your name:

We value your feedback, please feel free to express your honest thoughts on the following:

Booking Process: Fantastic Good Average Poor
Comments : _____

Service: Fantastic Good Average Poor
Comments : _____

Catering: Fantastic Good Average Poor
Comments : _____

Activities: Fantastic Good Average Poor
Comments : _____

What were the highlights of your stay here at The Centre and why?

What was your favourite activity and why?

How would you describe the service you received from the staff at The Centre?

What could we do to improve things at The Centre?

Thank you for taking the time to provide us with your thoughts, it is greatly appreciated,

Kind regards,

Emma Ebeling

Note: As you are a valued client of The Centre, for the next seven (7) days we will keep these same dates available for your event next year if you wish to rebook.

I am interested in rebooking with The Centre for our next event and would like to receive a Booking Form. Yes / No
The best time to contact me would be _____

I, _____ hereby give consent for my comments to be used in promotional materials for The Centre.

Signed: _____ Date: _____