[Company name]

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Salon customer feedback form

Date of visit	[Date]
Stylist	[Stylist name]

Your experience

Question	Answer / rating
How happy are you with the result? (1–5)	
How was your stylist? (1–5)	
Was the salon clean and comfortable? (1–5)	
Was it good value for money? (1–5)	
How would you rate the overall experience? (1–5)	
Would you recommend us to others?	

Comments

[Anything else you would like to tell us]

Contact (optional)

Phone	[Phone]
Email	[Email]