

Hotel Feedback Form Template

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We value your feedback and strive to improve our services. Please take a moment to share your experience with us.

Guest Information

Name	
Room Number	
Stay Dates	
Email (Optional)	

Overall Experience

How would you rate your overall stay?	
<input type="checkbox"/>	Excellent
<input type="checkbox"/>	Good
<input type="checkbox"/>	Average
<input type="checkbox"/>	Poor
Additional Comments:	

Room Quality

Cleanliness	
<input type="checkbox"/>	Excellent
<input type="checkbox"/>	Good
<input type="checkbox"/>	Average
<input type="checkbox"/>	Poor
Comfort of Bed and Amenities	
<input type="checkbox"/>	Excellent
<input type="checkbox"/>	Good
<input type="checkbox"/>	Average
<input type="checkbox"/>	Poor
Noise Levels	
<input type="checkbox"/>	Excellent
<input type="checkbox"/>	Good
<input type="checkbox"/>	Average
<input type="checkbox"/>	Poor
Additional Comments:	

Staff and Service

Friendliness and Professionalism of Staff	
	Excellent
	Good
	Average
	Poor
Promptness of Service	
	Excellent
	Good
	Average
	Poor
Additional Comments:	

Facilities

Quality of Food and Beverage (if applicable)	
	Excellent
	Good
	Average
	Poor
Recreational Facilities (e.g., pool, spa, gym)	
	Excellent
	Good
	Average
	Poor
Internet / Wi-Fi Connectivity	
	Excellent
	Good
	Average
	Poor
Additional Comments:	

Suggestions and Comments

Please share any suggestions or comments you have for improving your stay:

Would you recommend us?	
<input type="checkbox"/>	Yes
<input type="checkbox"/>	No

Future Contact (optional)	
<i>I agree to be contacted for follow-up regarding my feedback.</i>	
<input type="checkbox"/>	Yes
<input type="checkbox"/>	No

Thank you for your feedback!

*Your input helps us provide a better experience
for all our guests.*

DISCLAIMER

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