

Customer Service Feedback Form

Thank you for visiting the Alice Saddy Association. We value all our customers and strive to meet everyone's needs

What was the date of your visit? _____

1. Were you satisfied with the customer service we provided you?

Yes No Somewhat

Comments: _____

2. Was our customer service provided to you in an accessible manner?

Yes No Somewhat

Comments: _____

3. Did you experience any problems accessing our goods and services?

Yes No Somewhat

Comments: _____

Contact Information (optional):

Name: _____ Phone Number: _____

Email: _____

The Alice Saddy Association protects your privacy and your personal information. Your personal information will not be shared with any other parties, or used for any other purpose than for communicating with you regarding the comments or concerns that you have raised. We will make all reasonable efforts to address concerns or complaints immediately.