Client Feedback Form

 My goal is to provide clients with the best possible massage experience. I appreciate your willingness to take the time to give me honest feedback. Please rate each of the questions on a scale of 1-5 (where 1 is poor and 5 is excellent) and provide additional comments or suggestions in writing. Thank you.

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| Score | Description |
|  | 1. The overall atmosphere, cleanliness, and quality of the facility was professional and relaxing.
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|  | 1. My massage therapist was friendly, knowledgeable, and professional.
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|  | 1. My massage therapist started and ended the session on time.
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|  | 1. My massage therapist consulted with me about the type of massage I wanted to receive, the degree of pressure I enjoy, and the areas of my body where I want focused work. We had an agreed plan for the session before the start of the massage.
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|  | 1. My massage therapist followed the session plan we agreed on and I received the massage I asked for.
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|  | 1. My therapist asked about the degree of pressure of the strokes used during the session and adjusted the pressure appropriately when asked.
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|  | 1. The massage strokes felt firm, flowing, confident, and appropriate to the needs of my body.
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|  | 1. Draping, positioning with bolsters, lighting, music, and my overall warmth and comfort were attended to.
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|  | 1. My payment was processed in a timely manner and I was given the opportunity to book a future appointment at the end of the session.
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|  | 1. My overall experience was excellent and I would come back.
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Is there anything you believe I can improve on? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Other Questions, comments, statements, or concerns: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Thank you. Your feedback is greatly appreciated!

<http://www.dragonflytouch.massagetherapy.com>

You may bring this form to your next appointment, email your answers to me, or you may mail this form to:

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