

In-Store Experience Review Questionnaire

Name (optional):

Email (optional):

Date of Visit:

Store Location:

How would you rate your overall experience?

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Staff Friendliness:

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Store Cleanliness:

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Product Availability:

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

How likely are you to visit again?

Select an option



Additional Comments: