

Hotel Guest Feedback Form Template

Guest Details:

- Full Name: _____
- Room Number: _____
- Check-in Date: _____
- Check-out Date: _____
- Email Address: _____

Feedback Questions:

1. How would you rate the cleanliness of the hotel?

- Excellent Good Average Poor

2. How satisfied were you with the staff service?

- Very Satisfied Satisfied Neutral Dissatisfied

3. How would you rate the room comfort?

- Excellent Good Average Poor

4. Rate the quality of the food and beverage services:

- Excellent Good Average Poor

5. Were the hotel facilities (e.g., gym, spa) up to your expectations?

- Yes No

6. Did you encounter any issues during your stay? If yes, please describe:

7. How can we improve your future stays?

8. Overall, how would you rate your stay with us?

- Excellent Good Average Poor

9. Would you stay at our hotel again?

- Yes No

Signature:

- Guest Signature: _____

- Date: _____