**Customer Service Registration Form**

**Customer Information  
Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Service Preferences  
Type of Service:  
[ ] Technical Support  
[ ] Product Inquiry  
[ ] Complaint Resolution  
[ ] Feedback Submission  
Preferred Communication Method:  
[ ] Phone [ ] Email [ ] Chat Support**

**Service History  
Have you used our services before? [ ] Yes [ ] No  
If Yes, please provide details:**

**Feedback (Optional)  
How did you hear about us?  
[ ] Online Ad [ ] Referral [ ] Social Media [ ] Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Rate your previous service experience:  
[ ] Excellent [ ] Good [ ] Average [ ] Poor**

**Consent  
By signing, I agree to the use of my information for service-related communications and improvements.  
Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**