**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: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**