

# Business Testimonial Request Form

## 1. Business Information

- Business Name: \_\_\_\_\_
- Contact Person: \_\_\_\_\_
- Email Address: \_\_\_\_\_
- Phone Number: \_\_\_\_\_

## 2. Testimonial Format

- Preferred Format:
  - Written
  - Video
  - Audio

## 3. Testimonial Questions

Question	Response
How has our service benefited you?	
Would you recommend us?	
Additional Feedback	

## 4. Consent and Acknowledgment

- I agree to allow my testimonial to be shared publicly.

## 5. Signature

- Authorized Person Signature: \_\_\_\_\_ Date: \_\_\_\_\_