

Customer Testimonial Request Form

1. Customer Information

- Full Name: _____
- Email Address: _____
- Phone Number: _____
- Business Name (if applicable): _____

2. Testimonial Details

- How would you rate your overall experience?
 - Excellent
 - Good
 - Average
 - Poor

3. Describe Your Experience

- What did you like most about the product/service?

- What could we improve?

4. Permission to Use Testimonial

- I authorize the use of this testimonial for promotional purposes, including online and print media.

5. Signature

- Customer Signature: _____ Date: _____