

Feedback Form



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Your Trip Feedback!

Dear Traveller,

At Ciao Travel, our client feedback is an integral component of our quality control. Your feedback is a valuable means by which we monitor our product and services. Thank you for your time to assist us.

Name: _____ Booking No: CT _____

Date of Travel Departure: ____ / ____ / ____ Trip Duration: _____ Destination/s: _____

Have Your Say & Share With Us!

How did you find the services provided by Ciao Travel? _____

Share a personal experience, a trip find or recommendation. You are welcome to send us a holiday photo for our Pin-board in the office.

If you would like to share your testimonial on our website, please sign your name on this form to give Ciao Travel permission to feature your comment. Your first name and city with your comment will appear on our website.

Name: _____ Signature: _____ Date: _____

Comments on services arranged for your trip by Ciao Travel

Just a brief comment and a tick of the box will be sufficient. **Please tick one box below E = Excellent, G = Good, P = Poor**

	HOTEL NAME	LOCATION	PROPERTY SERVICE	ROOMS	COMMENTS
1			E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	
2			E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	
3			E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	
4			E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	
5			E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	
6			E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	
7			E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	
8			E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	
9			E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	
10			E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	

	TOURS	TRANSPORT	TOUR GUIDE	TOUR QUALITY	FOOD	COMMENTS
1		E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	
2		E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	
3		E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	
4		E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	
5		E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	
6		E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	E <input type="checkbox"/> G <input type="checkbox"/> P <input type="checkbox"/>	

Airlines:

Where did you fly? _____

What airline/s did you fly with on your trip? _____

How was your seat? E G P Comment: _____

How was the inflight service? E G P Comment: _____

How would you rate the food quality? E G P Comment: _____

How did you find the check-in service? E G P Comment: _____

Would you fly with this airline again? E G P Comment: _____

Additional Comments: _____

Cruise:

Where did you cruise? _____

What cruise line did you sail with on your trip? _____

How was your cabin? E G P Comment: _____

How was the service on board? E G P Comment: _____

How would you rate the food quality? E G P Comment: _____

How did you find the check-in service? E G P Comment: _____

How were your shore excursions? E G P Comment: _____

Would you cruise with this cruise line again? E G P Comment: _____

Additional Comments: _____

Car Rental:

Where did you self-drive on your trip? _____

Who was the car rental company? _____

What vehicle did you rent? _____

How was your vehicle? E G P Comment: _____

How did you find the rental depot service? E G P Comment: _____

Would you rent with this company again? E G P Comment: _____

Additional Comments: _____

Rail:

Where did you travel by train? _____

How was your seat? E G P Comment: _____

How was the on-board service? E G P Comment: _____

How would you rate the food quality? E G P Comment: _____

How did you find the check-in service? E G P Comment: _____

Would you travel by rail again? E G P Comment: _____

Additional Comments: _____

Thank you kindly for sharing your experience.



MEMBER

ACCREDITED