

Rockwind Grill

Dining/Catering Feedback Form





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| Timeliness of Food Arriving: Quality of Service: Staff Friendliness, Efficiency, Appearance: Cost of Service/Food was Fair: Overall Experience: | 1 5 ***** **** **** **** | |
|---|--------------------------------------|--|
| Did any staff member(s) exceed expectations? If so, please explain: | | |
| Do you have any suggestions for improvement? If so, please explain: | | |
| Was any part of your experience unsatisfactory? If so, please explain: | | |
| Additional Comments: | | |

