

## Let us Know!



## Please Check One Or Write In Your Response

Dining Room Environment	Excellent	Good	Fair	Poor
Was the table Set Properly?	·	-	-	<u></u>
Food Quality and Presentation				
Were the hot foods hot?		•	•	-
Were the cold foods cold?		<u> </u>		<u>-</u>
Please list any menu item you particularly enjoyed.				
Please list any menu item you would like improved.				
If there was a problem, was it resolved to your satisfaction?	<u></u>	-	-	<u></u>
Did the server or manager correct the problem?	<u></u>	<u> </u>	-	-
Customer Service				
Did you receive prompt service?		•	•	•
Did your server have thorough knowledge of the menu?	<u></u>	<u> </u>	-	<u>-</u>
Did your server check back with you during your meal?	<u></u>	-	•	-
If you requested item(s) not available, were you informed promptly?	<u>.</u>	•	-	-
What menu item was not available?				
Was a substitution offered?	<u></u>	<u> </u>	-	-

Would you like us to set up a time to discuss additional comments that you have?

it so, please tell us, what is the best time that we can reach you or meet with you?	T
Please tell us your name and the best way that we can be in touch with you.	

