

Guest Feedback Form

FULL NAME		DATE OF VISIT	
EMAIL ADDRESS		PHONE NUMBER	
Big Rivers Waterpark values guest feedback and is committed to continuously improving our park, attractions, and guest experience. To help us thoroughly review your concerns, please complete this form with as much detail as possible.			
FEEDBACK DETAILS			
1. WHICH AREA(S) OF THE PARK DOES YOUR FEEDBACK PERTAIN TO? ☐ Attractions/Rides ☐ Food & Beverage ☐ Ticketing & Retail ☐ Cleanliness ☐ Guest Services ☐ Team Member Interaction ☐ Safety & Security ☐ Other:			
2. PLEASE DESCRIBE YOUR EXPERIENCE, CONCERNS OR SUGGESTIONS BELOW:			
GUEST SIGNATURE	DATE		
FOLLOW-UP REQUEST			
WOULD YOU LIKE TO BE CONTACTED REGARDING YOUR FEEDBACK?			
☐ Yes (Preferred contact method: ☐ Phone ☐ Email) ☐ No, I just wanted to share my feedback			