

CUSTOMER FEEDBACK FORM

Thank you for visiting CAA Club Group. Your feedback is important to us. Please provide your feedback by answering the following questions to ensure that we meet expectations and can make improvements where necessary.

1.	Date of visit	
2.	Time of visit	
3.	Location of visit	
4.	Did we respond to your customer service needs during your visit?	<input type="checkbox"/> YES <input type="checkbox"/> NO
5.	Was our customer service provided to you in an accessible manner?	<input type="checkbox"/> YES <input type="checkbox"/> NO
	Please explain:	
6.	Did you encounter any problems in accessing our products and services?	<input type="checkbox"/> YES <input type="checkbox"/> NO
	Please explain:	
7.	Additional comments/suggestions or request for accommodation:	

Please provide your information below if you would like us to contact you regarding the feedback you have provided.

Name	
Phone Number	
Email	

Please send completed forms to Store Manager and accessibility@caasco.ca.

Thank you for providing your feedback.

This form applies to CAA Club Group (CCG) and its affiliated companies, including CAA Insurance Company, Orion Travel Insurance Company, Echelon Insurance, CAA South Central Ontario, CAA Manitoba and CAA Services (South Central Ontario) Inc. These are collectively referred to as "CAA Club Group of Companies").