



M.E.C. Corporation Pty Ltd
trading as **Women's Own Adventure**
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WOMEN'S OWN ADVENTURE – FEEDBACK FORM

1. Your Details

Your Name : _____

Your Address: _____

Home : _____ Mobile : _____ Work : _____

Email : _____

Your preferred method of contact : Mail Email Telephone – Home Mobile Work

2. Details of your Feedback

- | | | |
|---|---|---|
| <input type="checkbox"/> Products or Services | <input type="checkbox"/> Contact Centre | <input type="checkbox"/> Website |
| <input type="checkbox"/> Misleading Conduct | <input type="checkbox"/> Documentation | <input type="checkbox"/> Deposit / Pre-Payment / Cancellation |
| <input type="checkbox"/> Visa / Passport | <input type="checkbox"/> Refunds | <input type="checkbox"/> Ticket / Itinerary / Transfers |
| <input type="checkbox"/> Pricing | <input type="checkbox"/> Other please specify _____ | |

Summary of Feedback

3. Other Details

Name of the person you have been dealing with about your travel service (if known) _____

Have you spoken to any of our staff about this ? No Yes

If yes please provide details _____

4. Remedy requested No, I do not require return contact, this is for feedback purposes only

Yes _____

5. Signature and Date

Signature _____ Date _____

List of enclosed documents (if any) _____