

Beach House B&B Survey

Please answer the following questions about your stay

Q1 Was this your first stay at Beach House B&B?

- ☐ Yes
- ☐ No

Q2 How did you find out about the B&B?

- ☐ Guide
- ☐ Website
- ☐ Advert
- ☐ Recommendation
- ☐ Other

If other, please specify _____

Q3 What made you chose our B&B? (Please select all that apply)

- ☐ Star rating
- ☐ Location
- ☐ Recommendation
- ☐ Reviews
- ☐ Price
- ☐ Other

If other, please specify _____

Q4 What did you think of our B&B?

	Very Poor	Poor	OK	Good	Very Good	No opinion
Rooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Value	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

About yourself

Q5 What was the main reason for your stay?

- ☐ Business - Go to Q7
- ☐ Leisure - Go to Q6

Q6 What activities did you/are planning to do? (Please select all that apply)

- ☐ Visiting attractions
- ☐ Visiting friends / family
- ☐ Cycling and/or walking
- ☐ Going to the beach/seaside
- ☐ Engaging in sporting activities - e.g. golf, cricket
- ☐ Attending events - e.g. festivals, sporting events, arts & culture
- ☐ Specialist activity - e.g. bird watching, horse riding

☐ Other

If other, please specify _____

Q7 How often do you stay in a hotel?

- ☐ Less than 10 nights a year
☐ 10 to 24 nights a year

- ☐ 25 to 49 nights a year
☐ 50 or more nights a year

Q8 Are you?

- ☐ Male
☐ Female

Q9 How old are you?

- ☐ 18 to 24
☐ 25 to 39
☐ 40 to 59
☐ 60 plus

Q10 Where do you live?

Please enter your _____
postcode

Q11 Do you have any other comments that you would like to make?

Q12 Date of arrival

Q13 Date of departure

Q14 Number in party

Adults

Children

Q15 Would you stay here again?

- ☐ Yes
☐ No

Q16 Will you recommend us?

- ☐ Yes
☐ No

Q17 Would you like to receive information from us?

- ☐ Yes - please write your e-mail below
☐ No

E-mail address _____

Thank you for completing this questionnaire.