



**Parks and Recreation Department, Aquatics Division  
Customer Feedback Form**

*The City of Fernandina Beach would like to receive your thoughts or feedback  
on how the Aquatics Division can improve your experience.*

Please go to <https://goo.gl/forms/RU2ng9TS9HNmn4Gf2> to complete this survey  
or return a completed form to the Parks and Recreation Department, 2500 Atlantic Ave., Fernandina Beach, FL 32034  
fax 904-310-3462, email [krussell@fbfl.org](mailto:krussell@fbfl.org)

Overall, how would you rate your experience (circle one)?

Poor                      1                      2                      3                      4                      5                      Excellent

Please select the relevant feedback area from below ✓ :

- Aquatics Programming Feedback (please name program below)
- Swimming Pool Facility Feedback
- Customer Service Feedback
- Other \_\_\_\_\_

Please share your comments regarding your selection above in the space provided:

Suggestions, if any:

Was there a particular employee who made your experience better or worse?  Yes                       No  
If yes, please provide employee name and explain below.

Employee Name: \_\_\_\_\_

Comments:

Contact information (optional):

Your Name \_\_\_\_\_

Phone and/or email) \_\_\_\_\_

**Thank you for your input!**