



# Inside Out Nutritional Therapy

## DETOX PROGRAM 2021 *Feedback.*

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

We'd love to get your feedback on how you are feeling after the Detox Program and what you thought of it as a whole. Please rate how you feel for each option below and provide additional comments if required.

	VERY POOR	POOR	FAIR	GOOD	VERY GOOD	EXCELLENT
The course as a whole was:						
The course content was:						
The instructor's contribution to the course was:						
Useability of the program was:						
Cost of the program was:						
Additional resources provided were:						
The meal plans were family friendly:						
The meal options were:						
The variety of meals was:						
After the course I feel:						
The Facebook Support Group was:						

Additional Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Would you do another course with us?  YES  NO

Do you want to use our services and continue this health journey?  YES  NO

Would you recommend this program to friends and family?  YES  NO

*Thank you for  
your time!*