

Testimonial Request Form

Patient's Name:
With your permission, Stuart Yates Osteopathy may choose to share your comments below for marketing purposes. We may contact you for more information. With your approval below, you are giving Stuart Yates Osteopathy your authorisation to use this testimonial below in its marketing efforts which include, but may not be limited to, its advertising, promotion, website, or other communications to help promote the company.
Please place your initials within the box to the right to indicate your permission.
Negative comments are also welcome – Help us improve our service.
Please describe how your experience with Stuart Yates Osteopathy has been beneficial to you. How has the experience been for you overall?

Testimonials/Reviews can also be left at: facebook.com/StuartyYatesOsteopathy or yell.com

Please note that Stuart Yates Osteopathy may contact you for additional information regarding your testimonial as needed.