

EVENT RSVP FORM

Event Name: _____ Location: _____

Attendee Information:

Full Name: _____

Email Address: _____

Phone Number: _____

RSVP Details:

Will attend: _____ (Yes/No)

Number of Guests: _____

Dietary Restrictions / Preferences: _____

Emergency Contact:

Name: _____

Phone Number: _____

Terms and Conditions:

By submitting this RSVP form, the attendee agrees to comply with all event rules and regulations. The attendee acknowledges that the organizer is not liable for any personal injury, loss, or damage occurring during the event. The attendee consents to the use of photographs or videos taken during the event for promotional purposes. Cancellation must be communicated in writing to the organizer. This agreement shall be governed by and construed under the laws of the United States of America. Any disputes arising from this RSVP shall be subject to the exclusive jurisdiction of the federal or state courts located in the organizer's principal place of business.

Acknowledgement and Signature:

Signature: _____ Date: _____

ATTENDEE SIGNATURE

ORGANIZER SIGNATURE

Signature: _____

Signature: _____

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