APPOINTMENT REQUEST FORM

Requested Location: _____ Requested Time: _____

Requestor Information:

Full Name: _____

Company (if applicable): _____

Contact Phone: _____

Email: _____

Appointment Details:

Purpose of Appointment: _____

Preferred Date(s) and Time(s): _____

Alternate Date(s) and Time(s): _____

Location/Address: _____

Additional Information:

Please provide any additional details, special requirements, or accommodations needed for this appointment. Include information that may assist in the preparation or scheduling of your requested appointment.

Authorization and Agreement:

By submitting this Appointment Request Form, the Requestor certifies that all information provided is true and accurate to the best of their knowledge. The Requestor agrees to comply with all applicable policies and procedures related to the appointment and understands that appointment confirmation is subject to availability. The Requestor acknowledges that this form does not constitute a binding contract until confirmation is received from the authorized party.

Privacy and Data Use Notice:

Requestor's personal information will be collected, stored, and processed solely for the purpose of managing and confirming the appointment. Information will be handled in accordance with applicable United States privacy laws and regulations. Requestor consents to the use and disclosure of their information to relevant personnel and third parties as necessary to facilitate the appointment.

Limitation of Liability:

To the maximum extent permitted by law, neither the service provider nor its agents shall be liable for any indirect, incidental, special, consequential, or punitive damages arising out of or related to the appointment request or any services provided. Requestor agrees to indemnify and hold harmless the service provider against all claims, damages, liabilities, costs, and expenses arising from Requestor's actions or omissions.

Governing Law and Venue:

This Appointment Request Form and any resulting appointment shall be governed by and construed in accordance with

the laws of the United States and the applicable state jurisdiction without regard to conflicts of law principles. Any disputes arising under or in connection with this form shall be resolved exclusively in the state or federal courts located within the applicable jurisdiction.

REQUESTOR'S SIGNATURE

Signature: _____

AUTHORIZED REPRESENTATIVE SIGNATURE

Signature: _____