

# ATTENDANCE FORM

Event Name: \_\_\_\_\_ Location: \_\_\_\_\_

Organizer: \_\_\_\_\_

**Participant Information:**

Full Name: \_\_\_\_\_

Government ID / Driver License No.: \_\_\_\_\_

Address: \_\_\_\_\_

Phone / Email: \_\_\_\_\_

**Attendance Details:**

Date of Attendance: \_\_\_\_\_

Time In: \_\_\_\_\_ Time Out: \_\_\_\_\_

**Acknowledgment and Consent:**

By signing below, Participant acknowledges their voluntary attendance at the event and agrees to comply with all applicable rules, regulations, and safety instructions. Participant releases Organizer and all associated parties from any liability for personal injury, property damage, or other losses that may occur during attendance, except to the extent caused by gross negligence or willful misconduct. Participant consents to the collection and use of personal information solely for purposes related to this event, in compliance with applicable United States laws.

**Signature:** \_\_\_\_\_

**Printed Name:** \_\_\_\_\_

**Relationship to Participant (if applicable):** \_\_\_\_\_

**PARTICIPANT'S SIGNATURE**

**ORGANIZER'S SIGNATURE**

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

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