

Social Event Registration Form

Print Legibly

Must be complete, correct, and submitted to Commons Room 250 by Wednesday at NOON

Host Organization: _____ Date: _____
(no abbreviations) (ex. Saturday, March 25, 1979)

Location: _____ Begins: _____ Ends: _____
(provide the address) (ex. 7:30pm) (ex. 2:00am)

Theme: _____ Band or DJ / Name: _____
(Cocktail Party?)

Estimated attendance: _____ Other Chapters Involved: _____
(do not exceed the building capacity)

Sober officers in charge: (2 required): 1. _____
2. _____

Sober drivers: (2 required): 1. _____
2. _____

Sober TIPS Trained Bartenders: 1. _____
(1 adult or 2 students required):
(these should be the only people distributing alcohol) 2. _____

Security: (1 adult or 2 students required) 1. _____
(Putting Larry or Baner if they are not actually
doing it is not acceptable, actual name required) 2. _____

House Director informed of Date and Plans: _____
House Director informed of plans for emergency overnight stays: _____
Emergency procedures checklist and phone numbers available: _____
Amplified sound permit obtained from the police station: _____ (you or a sober officer must sign for it)
Invitations and/or guest list available: _____ Other guests expected: _____
Trash containers at exits: _____ Clean-up crew designated: _____
Applicable alcohol policies understood: _____ Applicable alcohol policies explained to chapter: _____

**DURING ALL SOCIAL EVENTS, CHAPTERS MUST PROVIDE NON-ALCOHOLIC BEVERAGES
(use water tubs) AND SNACKS FOR ALL IN A VISIBLE LOCATION AT ALL TIMES**

STATEMENT OF RESPONSIBILITY: I have read and understand all the requirements of the IFC Constitution, Panhellenic Constitution and University Policy on Alcohol and Other Drugs and am aware of the consequences for non-compliance. I certify to the best of my ability that this event will be held in compliance with such guidelines.

SIGNATURE: _____ PRINT NAME: _____

EMAIL ADDRESS: _____ DATE: _____