

UtahStateUniversity

FRATERNITY & SORORITY LIFE

Fraternity and Sorority Event Registration Form

For events with alcohol: this form must be submitted and discussed with the Fraternity and Sorority Life Coordinator ten business days prior to the event before 5:00 PM. The final guest list must be submitted at least 48 hours before the event.

For events without alcohol: only the form must be submitted five business days prior to the event before 5:00 PM.

The chapter does hereby accept full responsibility for the event stated below. In accepting this responsibility, the chapter will make certain that the applicable federal, state, county, city, and University laws and policies, as well as the Local and national/international organization Risk Management Policies and Procedures are enforced. If national/international organization policies are stricter on regulations than those listed below, chapters will be held to the national/international organization standards. The chapter understands that it is required to regulate the behavior of all individuals in attendance during the event. The chapter understands that failure to abide by all terms of this form and all event policies and regulations may result in disciplinary action. The chapter understands that hosting/participating in this event without full completion of this form and emailed confirmation by its respective governing council is a violation of the Relationship Agreement.

*Events that need an Event Registration Form: *subject to change*

- Closed parties, open parties, chapter retreats, tailgates, alumni events, formals/in-formals, exchanges/socials, recruitment events, any event where alcohol will be present, any pre-planned event **not** including internal brotherhood/sisterhood events, university sponsored workshops, ritual, chapter meetings, or if an event is taking place in the Taggart Student Center (TSC).

EVENT INFORMATION

Chapter Name: _____ Co-Sponsoring/Participating Chapter(s): _____

Date of Event: _____ Start Time: _____ End Time: _____ Check: if this is a re-occurring event

(Must be registered at least ten business days prior if alcohol is involved, five business days for dry events.)

Theme: _____

General Event Description:

LOCATION

Chapter Facility Private Residence Recreational (retreat, camping trip, etc.) Event Venue Other

Name of Location: _____

Address of Location: _____

Point of Contact (for the event): _____

of Chapter Members/New Members: _____ # of Alumni Attending: _____

of Guests of Chapter Members/New Members: _____

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CONTACT INFORMATION

(Events with alcohol are required to have at least two members designated as the points of contact for the event, these members must be completely sober for the entirety of the event.)

Chapter President Name	Phone	Email	Signature
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Risk Manager Name	Phone	Email	Signature
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Event Planner/Social Chair Name	Phone	Email	Signature
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Other Responsible Person (if needed)	Phone	Email	Signature
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Chapter Advisor	Phone	Signature	Date
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Transportation to and from the Event (Select all that apply): N/A Buses Private Vehicles

List any and all steps you will take to mitigate the risk of this event beyond your standard national and local policies:

Please provide any additional information about this event that you would like to disclose:

FOR OFFICIAL USE ONLY

Reviewed By: _____ Date: _____

Comments

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ADDITIONAL INFORMATION FOR EVENTS WITH ALCOHOL

(To be completed after consulting with the Fraternity/Sorority Life Advisor)

HEALTH AND SAFETY INFORMATION

The following alternative non-alcoholic beverages will be provided to guests:

The following non-salty foods will be provided to guests:

The following system will be used to verify the event attendees on the guest list, and to verify 21+ attendees:

(Guest list must be turned in at least 48 hours before the event. *Note: the guest to active/new member ratio should not exceed 2:1*)

Type of Entertainment Provided at the Event:

(DJ, Band, Dancing, Games, etc.)

Please provide any additional information about this event you feel is pertinent:
