

# **NOTIFICATION FORM FOR STUDENT ORGANIZATION EVENTS WITH ALCOHOL**

Please submit a copy of this form **five (5) business days** prior to the event to the Leadership Coordinator via email. Guest list must be sent **two (2) business days** prior to event via email to the Leadership Coordinator.

1. **NAME OF ORGANIZATION (S) SPONSORING EVENT:** \_\_\_\_\_

2. **DATE OF EVENT:** \_\_\_\_\_ **START TIME:** \_\_\_\_\_ **END TIME:** \_\_\_\_\_

3. **LOCATION:** \_\_\_\_\_

**Circle one:**      **THIRD PARTY VENDOR**      or      **BYOB**

4. **NAME AND PHONE NUMBERS OF OFFICERS IN CHARGE OF EVENT INCLUDING THE PRESIDENT OF THE ORGANIZATION** – Note: If the responsible officer or President is unable to attend the event the President of the organization may appoint another officer to assume this responsibility.

Name	Student Email and Phone Number
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1. \_\_\_\_\_

2. \_\_\_\_\_

3. **ATTACH THE FOLLOWING AS APPLICABLE TO YOUR EVENT:**

- **A. Guest List:** Organizations are expected to include a guest list with the event notification form. The list must be typed and alphabetized and will be used for check-in at the event. Guests list must not exceed the capacity limits of the facility’s public areas as determined by the fire marshal. Attendance at student organization functions with alcohol will **not exceed two invited guests for each active organization member**, regardless of the capacity of the facility. For example, if the organization has 30 members, it can invite 60 people, for a total of 90 people present at the event. **NO UNINVITED** guest are allowed into the event location.
- **B. Invitations:** An exact replica of the invitation to be distributed to guests should be attached to this notification form.
- **C. Third-party vendor:** If the event has a third-party vendor serving alcohol, a signed vendor statement of responsibility must be attached. The vendor is completely responsible for alcohol distribution, and collection of money for alcoholic beverages. The third-party vendor or a security agent is responsible for checking the identification of customers as well as clearly identifying and marking all under aged guests.
- **D. BYOB:** If the event is being held as a BYOB event, a copy of the communication sent out informing all members and guests that those over 21 may bring a maximum of ONE (1) six-pack of beer or four (4) wine coolers. A copy of the event punch card for alcoholic beverages being used at the event. A list of the appointed members collecting and disbursing beverages.

6. **NAME OF CONTRACTED SECURITY AGENT (S):** \_\_\_\_\_

**PHONE #** \_\_\_\_\_

7. **WRISTBANDS:** Wristbands must be used to identify those 21 years of age or older attending the event.  
Under aged attendees must be identified with an “X” on both hands.

- What color of wristbands will be used?  
\_\_\_\_\_

- How many wristbands will you need to purchase? \_\_\_\_\_

**8. WHAT FOOD AND NON-ALCOHOLIC BEVERAGES WILL YOU PROVIDE?**

**9. TOTAL NUMBER OF INVITATIONS:**

How many invitations will be distributed for this event? \_\_\_\_\_

**10. ORGANIZATION STATEMENT OF RESPONSIBILITY:**

By signing below, we understand that the organization(s) listed above as sponsors are responsible for following all applicable University, county, state, and federal guidelines regarding the use, sale, and possession of alcohol. Suppose even one of the organizations above has a stricter national policy than the University policy. In that case, ALL sponsoring organization(s) & guests must follow the more stringent policy.

We understand that it is the responsibility of ALL organization members, especially the officers, to ensure the safety of our members and guest at our event.

We also understand that if it is discovered that any of the sponsoring organizations are not following the appropriate policy, all sponsoring organizations may face university sanctions, including but not limited to organization probation or suspension.

<b>Name of President (print)</b>	<b>Signature of President</b>	<b>Date</b>
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<b>Name of Event Planner (print)</b>	<b>Signature of Event Planner</b>	<b>Date</b>
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**11. ADVISOR STATEMENT OF RESPONSIBILITY:**

As the Advisor to the organization above, my signature indicates that I have reviewed the event's details with the organization officers. It is my understanding that they will follow all appropriate university, county, state, and federal guidelines regarding the use, sale, and possession of alcohol.

<b>Name of Advisor (print)</b>	<b>Signature of Advisor</b>	<b>Date</b>
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DO NOT WRITE BELOW THIS LINE  
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Received by the Leadership Coordinator: \_\_\_\_\_  
Date and Time

This form will be reviewed and returned via email to the President and Advisor by the Leadership Coordinator within 24 hours of when it is received.

\_\_\_\_\_ Party plan as written meets minimum standards.

\_\_\_\_\_ Party plan as written does not meet minimum standards and cannot be held as stated in this form.

Specific standards that have not been met: \_\_\_\_\_

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\_\_\_\_\_