

SOCIAL EVENT REGISTRATION FORM

Event Sponsor(s): _____

Title of the Event: _____

Responsible Person (must be 19 years of age or older) 1 Responsible Person for every 50 people in your anticipated attendance. ***If more than 2 write on back.** (1 =1-50, 2 =50-100...etc)

Print Name	Date of Birth	Phone #
Signature _____		

Print Name	Date of Birth	Phone #
Signature _____		

Date of Event: _____ Start Time: _____ End Time: _____

Event Location: _____ Attendance Number: _____

Number of attendees must never exceed the Building and Fire Code Occupancy limits. The responsible Persons are required to check this number with Campus Safety.

BYOB Event:

Quantity of alcohol (beer and wine) for individual consumption _____

Student Sponsored Event:

Quantity of alcohol for whole social event _____

Event Total Wrist Bands: _____ Description: _____

Sororities: (Sororities pick-up their own wristbands for their members and are responsible for them)
 Membership Number/ Wrist Band Number: _____

I have read and understand the above Event Sponsor Registration Form, including the responsibilities I will be assuming, and agree to abide by the Social Events with Alcohol Policy and the Registration Form.

_____ Initial if a Fraternity or Sorority, stating that you understand that any violation of FIGP Risk Management Policy at this event may result in judicial action taken against all sponsoring chapters.

Responsible Person Signature(s): _____ **Date** _____

Director of Fraternity and Sorority Life _____ **Date** _____