

# Fraternity and Sorority Social Event Notification Form

- ★ This form is required for all social events (additional forms to be completed for events with alcohol.)
- ★ Submit the form to the Vice-President of your governing council
- ★ Forms must be turned in at least one week (7 days) prior to the event.
- ★ Co-sponsored events must be signed by all participating organizations.

Chapter Name(s): \_\_\_\_\_

Date Submitted: \_\_\_\_\_ Date of Event: \_\_\_\_\_

Venue: \_\_\_\_\_

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

Time of Event: Begins \_\_\_\_\_ Ends: \_\_\_\_\_ (Total 4 hours maximum)

Brief Description of the Event: \_\_\_\_\_

Theme (if applicable): \_\_\_\_\_

Suggested Attire: \_\_\_\_\_

How many people will be attending? \_\_\_\_\_

To Restrict Access Guest List Must be Presented at the Door (*check one*):

- The chapter has this documentation completed \_\_\_\_\_
- The chapter will have this document finalized prior to Event \_\_\_\_\_

(The Governing Council reserves the right to request this document at any time, DO NOT DISCARD)

Will alcohol be served at this event? Yes No

*\*If yes, please attach third party vendor checklist, guidelines, ABC License, and General Liability Insurance*

Social Chair(s) Name: \_\_\_\_\_ Phone/Email: \_\_\_\_\_

Risk Management Chair(s) Name: \_\_\_\_\_ Phone/Email: \_\_\_\_\_

President(s) Name: \_\_\_\_\_ Phone/Email: \_\_\_\_\_

Submitted by: \_\_\_\_\_ Signature/Date: \_\_\_\_\_

## For Office Use Only:

Approved:  Yes  No

If No, Reason:

Signature of Vice President: \_\_\_\_\_

Signature of President: \_\_\_\_\_

Date Filed: \_\_\_\_\_