

DREXEL UNIVERSITY Fraternity & Sorority Life Event with Alcohol Policies, Procedures, and Request Form

Instructions:

- 1. Read and complete the Event with Alcohol Policies, Procedures and Request Form.
- 2. The completion of this form is required for all chapter-related events where alcoholic beverages will be served in a chapter facility.
- 3. Completed form must be typed.
- 4. Return the completed form to Fraternity & Sorority Life, Dean of Students Suite (215 Creese Student Center).
- 5. Event with Alcohol Policies, Procedures and Request Form should be submitted no later than 2 weeks prior to the event date.

Event Approval Procedure:

- 1. Upon receiving the form, the Fraternity/Sorority Life staff will ensure that it has been accurately completed.
- 2. The Fraternity & Sorority Life staff will verify that the host chapter(s) is in good standing with the University and appropriate governing council.
- 3. Event registrations will be announced the Tuesday prior to the event date.

Vendor Procedure:

- 1. A copy of the vendor's certificate of insurance should be stapled to the back of this form and/or emailed to greeklife@drexel.edu. The certificate of insurance is due to FSL no later than 2 weeks prior to the event date.
- 2. Vendor certificates will be reviewed by the Office of Risk Management to ensure compliance with University requirements.

Guest List Procedure:

- 1. Guest lists must be submitted at least **2 business days prior** to the event date.
- 2. Guest lists may be submitted in hard copy to Creese 215 or electronically to greeklife@drexel.edu
- 3. Guest lists must be submitted in the format provided by FSL

Host Fraternity Name: Date of Event:		Time of Event: From			
Location of Event: Please check one of the following fraternity properties.					
\Box 200 N. 34 th Street	\Box 204 N. 34 th Street	\Box 206 N. 34 th Street	\Box 210 N. 34 th Street		
\Box 214 N. 34 th Street	\Box 216 N. 34 th Street	□ 3401 Powelton Avenue	□ 3405 Powelton Avenue		
□ 3421 Powelton Avenue	\Box 216 N. 33 rd Street	□ Other:			

Type of Event: Please check one of the following event types.

□ Brotherhood Only Event – No guests; Members only permitted at this event

• An approved bartending vendor must be hired for this event

□ Date Party/Invitation Only Event – Invited guests only

- An approved bartending vendor must be hired for this event
- A guest list must be submitted to the FSL, 215 Creese at least 2 business days prior to the event

□ Multiple Chapter/Organization Event – Event hosted by more than one fraternity/sorority; Invitation only event

- An approved bartending vendor must be hired for this event
- A guest list must be submitted to the FSL, 215 Creese at least 2 business days prior to the event
- □ Alumni Event Event hosted in conjunction with or by the fraternity's alumni organization
 - An approved bartending vendor must be hired for this event
 - A guest list must be submitted to the FSL, 215 Creese at least 2 business days prior to the event

Is the event co-sponsored with another group?	\Box Yes \Box No		
If YES, list the organizations and answer the questions below:			
Name of Co-sponsoring Organization:			
Name and Title of Co-sponsoring Organization Contact:			
Email: Phone Number:			
Have you discussed federal, state, and local laws, Fraternity and University policies?	\Box Yes \Box No		
Have representatives from all organizations met to establish event plans?	\Box Yes \Box No		

Will any of the guests be under 21 year of age? \Box Yes \Box No

What procedure will be in place to ensure compliance with University policies and state law?

What type of food will be served? _____

Name of approved vendor/company providing bartending services: ____

Address:____

Phone Number:_____

*A copy of the certificate of insurance listing Drexel University as a primary additional insured and that meets University specified requirements for the vendor is required. Please submit a copy along with this form.

Complete the following BYOB Checklist:

 \Box A procedure has been defined for this event to check IDs for those of legal drinking age.¹

□An approved vendor has been hired to provide bartending services for this event.

 \Box A copy of the certificate of insurance listing Drexel University as a primary additional insured has been submitted for all vendors (ex: bartending vendor).

The host organization(s) has wristbands to identify those of legal drinking age.

The organization(s) has submitted a guest list for the event to FSL, Creese 215 or greeklife@drexel.edu

 \Box No hard liquor is allowed.

¹ The same vendor may be hired to both check IDs and provide the bartending service.

 \Box Drinking games will not be permitted to take place at the event. This includes but is not limited to shots of any kind, beer pong, flip cup, etc.

Beer and wine coolers are the **only** type of alcohol allowed at the event.

 \Box Alcohol brought to the event by an individual is for that individual's consumption and the alcohol is not to be given away, sold or otherwise provided to others.

What will be done with alcohol not consumed at the event?

- I have read the Fraternity & Sorority Life Policy for Events with Alcohol and I accept responsibility that appropriate measures will be taken to prevent violations of the policy
- I understand that no person shall sell, deliver or give away alcoholic beverages to, or cause or permit alcoholic beverages to be consumed by, any minor under the age of 21 years.
- I understand that I am responsible for the actions of my guests, invitees and attendees while on University property or at any University event.
- I understand that **only beer and wine coolers** are permitted to be served at this function unless approved prior to or with the submission of this request form, and that no alcoholic beverages other than those being served may be consumed at the event.
- I understand that I am responsible for upholding the policies and procedures of my National/International Fraternity or Sorority.
- Any violation of the Fraternity & Sorority Life Policy for Events with Alcohol or federal, state or local laws, or failure to comply with the above, will result in the alcohol being removed from the premises by the Department of Public Safety. Any violation may also result in the loss of future privileges to serve alcohol at University sponsored events and/or additional disciplinary action.

Name of Person Completing Report:	Signature:	
E-mail Address:	Phone number:	
Name of President:	Signature:	
E-mail Address:	Phone number:	
Name of Social Chair:	Signature:	
E-mail Address:	Phone number:	
Name of Risk Management Chair:	Signature:	
E-mail Address:	Phone number:	
Name of Co-Sponsoring President:	Signature:	
E-mail Address:	Phone number:	
Name of Co-Sponsoring Social Chair:	Signature:	
E-mail Address:	Phone number:	
Name of Co-Sponsoring Risk Management Chair:	Signature:	
E-mail Address:	Phone number:	