# of points:_____

+/- points:_____

Social Event Registration Form

DUE AT NOON ON THURSDAY THE WEEK PRIOR TO THE EVENT

Emailed:_____

Blackboard:_____

ORGANIZATION 1: _____ **ORGANIZATION 2**: _____ **ORGANIZATION 3**: _____

Date:_____ **Day**: Sun Mon Tues Wed Thurs Fri Sat **Start time**:_____ **End time**:_____

Location of Event: _____
(Include name of venue, address, city, & zip)

Description of Event:_____
(Include theme title, costumes, and music)

Officer in Charge of Event: _____
Name Phone (during event)

# of Guests:_____ **Mode of Transportation:**( )Bus*( )Personal Vehicles( )Walking

If more then 1 organization sponsoring: the guest list is limited to 1 guest per member of each organization or 400 people total, whichever is higher.

***Bus Company & Phone # :** _____ **# of Buses**:_____

Alcohol: ( ) Alcohol Free ( ) Licensed Bar tender and cash bar **(through registered venue above or verified caterer) (off-campus events only)**

Guests: ( ) Members Only ( ) Members & Guests ( ) Open to Campus Community ***(alcohol free events only)***

The following information is for events WITH ALCOHOL only.

GUEST LIST MUST BE SUBMITTED WITH ALL OTHER PAPERWORK _____ Guest List (include full name as appears on DL)
(Please Initial your acknowledgement)

Please ensure all information below is on file BY 12 NOON ON THURSDAY THE WEEK PRIOR TO THE EVENT:

_____ Venue Safety Addendum
(Please Initial your acknowledgement)

_____ Venue Liability Insurance
(Please Initial your acknowledgement)

_____ Venue Contract
(Please Initial your acknowledgement)

Please ensure that the following policies are adhered to (please initial that you understand and will abide by these policies):

_____ Carding at the Door by 3rd Party Security (Drivers' License or Government issued ID)
(Please Initial your acknowledgement)

_____ Alcohol can only be available via cash bar and the organization or its members may not sponsor open tabs (no BYOB)
(Please Initial your acknowledgement)

_____ Non-alcoholic beverages and non-salty food will be provided for all guests
(Please Initial your acknowledgement)

_____ Event may not exceed 400 people or the maximum size of the venue (whichever is smaller)
(Please Initial your acknowledgement)

By signing below, on behalf of my organization, I understand and will ensure my organization follows all policies of SMU our chapter & appropriate governing council.

_____	_____	_____
Print President's Name & Organization	President's Signature	Phone #
_____	_____	_____
Print President's Name & Organization	President's Signature	Phone #
_____	_____	_____
Print President's Name & Organization	President's Signature	Phone #