

GREEK LIFE
SOCIAL EVENT PLANNING FORM
University of San Diego

This form, or similar national organization paperwork, must be submitted, by EACH ORGANIZATION involved, to the Director of Student Organizations and Greek Life prior to ANY event involving alcohol. Complete the form in its entirety and the Social Event Planning Checklist, and submit them no later than the day after the last chapter meeting before the event (i.e. if chapter meeting is on Sunday night forms must be submitted on Monday). It is recommended that copies are made and kept on file with the chapter.

GENERAL INFORMATION

Name of Event: _____

Group Sponsoring Event: _____

Organizations Co-Sponsoring Event: _____

Person(s) in Charge of Planning Event: _____

Person(s) in Charge of Risk Management: _____

Day/Date of Event: _____

Times of Event: From _____ **To:** _____

Has this event been held in the past _____

Did any accidents occur at this event _____

*If yes, attach an explanation of accident and changes that have been made to prevent such accidents

ALCOHOL PROCEDURES

If the event is to be a BYOB event the chapter president(s) must meet with the Director of Student Organizations prior to the event. If the event is to be held at a licensed establishment with a cash bar be sure to attach a copies of the contract with the establishment, the establishment's liquor license and liquor liability insurance certificate. Be sure that the serving and monitoring of alcohol is in accordance with University policy.

Cash bar arranged by: _____

Minimum Guarantee: _____

Who will check
IDs? _____

Location of Bar: _____

How will those of legal drinking age be identified? _____

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What procedures will be taken if minors are observed drinking? _____

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What will be done if some one has too much to drink? _____

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NON-ALCOHOLIC BEVERAGES

Provided by: _____ Type: _____

Amount: _____

Cost: _____

FOOD

Provided by: _____ Type: _____

Amount: _____

Cost: _____

CROWD CONTROL

Be sure to attach a guest list, and copies of the security contract and company's insurance certificate with the completed form.

What is the planned attendance? _____

How many sober monitors from your organization will there be? _____

Names: _____

Security Company: _____ Number of Guards: _____ Paid for By: _____

Hours Hired: _____ Start Time: _____ End Time: _____ Cost: _____

Responsibilities: _____

Will advisors be present at:

Bus Loading: _____

Who: _____

Event: _____ Who: _____

Bus Drop off: _____ Who: _____

TRANSPORTATION

Be sure to attach copies of the contract and the company's insurance certificate, and to review the University travel guidelines to make sure the event complies. Complete the online bus registration form at greeklife.sandiego.edu.

Company: _____ Number of Vehicles: _____ Cost: _____

Paid for by: _____ Pick-up Location: _____ Times: _____

Drop off Location: _____ Times: _____

SIGNATURES

As the sponsoring organization, we have read and understand the applicable University and Student Organizations policies and we accept responsibility for compliance with these regulations as well as compliance with the laws of the State of California and the city/county in which our event is taking place. We guarantee that all responsible precautions will be taken to see that those under legal drinking age will not be served at our event and we have put into place reasonable enforcement procedures for all applicable federal, state and local laws. We have budgeted expenses of this event and agree to costs as specified above. Without all appropriate signatures below, we understand that this social event may not take place.

Attach copies of contracts for this event to this form before submitting it and maintain it in your files.

SPONSORING ORGANIZATION RISK MANAGER: _____

SPONSORING ORGANIZATION EVENT CHAIR: _____

SPONSORING ORGANIZATION PRESIDENT: _____

SPONSORING ORGANIZATION ADVISOR: _____

Reviewed by:

DIRECTOR OF STUDENT ORGANIZATIONS AND GREEK LIFE

Date

Comments: