ARKANSAS STATE UNIVERSITY GREEK LIFE
SOCIAL EVENT PLANNING FORM

- This form is required for all chapter-related events
- This form must be submitted to the Office of Greek Life by 5pm, 2 weeks/10 business days prior to the event.
- Accompanying guest list must be submitted at least 2 days prior to the event.
- For co-sponsored events the form must be signed by all participating organizations.
- A sketch of all construction plans including fences, stages, and built decorations must be included with this form.

Date of Event:

☐ (If applicable) Our chapter has registered this event with our National Organization

Type of Event:

☐ Date Event (Limited to Members and Dates Only)

☐ Invitation Only Social Event (Limited to chapter members and a guest list with a maximum of 3 guests per member or the building fire code, whichever is smaller)

☐ Other = Please Describe:

Event Hosting Chapter(s):

Event Theme:

Event Location (address must be provided if other than chapter house or on campus):

Hours of Event: Start Time: End Time:

Approximate Attendance Expected:

(If applicable), Name of Hired Licensed & Bonded Security:

Main Contact Person for Event: Phone #:

Secondary Contact Person for the Event: Phone #:

Monitors will be identified by wearing: _____________________________

Monitors:

1. ______________ (SIGNATURE) 2. ______________ (SIGNATURE)

3. ______________ (SIGNATURE) 4. ______________ (SIGNATURE)

5. ______________ (SIGNATURE) 6. ______________ (SIGNATURE)

7. ______________ (SIGNATURE) 8. ______________ (SIGNATURE)

9. ______________ (SIGNATURE) 10. ______________ (SIGNATURE)

For Office Use Only

Date Received: Guest List Pre-Party Received:
Guest List Due: Guest List Post-Party Received:
**Greek Life Social Event Checklist**

*(Check to acknowledge adherence)*

**Entrance/Guest List/Wristbands**

- The chapter will make an appointment with the office of Greek Life to discuss the event at least 2 days prior to the event. At this time the guest list is due (if applicable) and IFC chapters will receive wristbands.

- There will only be one available entrance and exit to the event throughout its duration.

- Trash cans will be placed at the entrance/exit.

- Those who are on the guest list will have their valid, government issued photo identification verified.

- Those who are of legal drinking age will receive a wristband if applicable for the event. Wristbands may be picked up at the Office of Greek Life at time of guest list drop-off.

- No open containers are permitted entering or exiting the event.

**Consumption of alcohol (if applicable)**

- Alcohol may be consumed only within the enclosed property of a fraternity house.

- No alcohol will be sold, no alcohol will be consumed by anyone under the legal drinking age, and no alcohol will be served from common sources (kegs, punch, etc)

- Glass bottles will be strictly prohibited.

**Miscellaneous**

- The theme of the event will be in good taste and will not violate the values and standards of the host organization.

- Monitors/Marshals have been arranged at a rate of 1 monitor per 30 people expected to be in attendance (members and guests) at the event.

- All security/monitors will wear clothing identifying them as such.

- The host chapter will be responsible for providing a tub of bottled water in a visible location.

- The host chapter will review national/international policies set forth by their organization as well as the Arkansas State Greek Organization Social Event Guidelines and make sure that any and all inter/national policies are being followed in addition to those set forth by the ASU Office of Greek Life.

- The chapter property must be completely cleaned by 7am on the morning after the event.

- The signed guest list/liability waiver and post-event report must be turned in to the Office of Greek Life by 5pm on the first business day after the event.

As an official representative of my chapter, I acknowledge that that chapter will adhere to the Greek Organization Social Event Guidelines, the chapter’s inter/national fraternity policies, university policies, and all federal, state, and local laws.

__________________________  ____________________________  ____________________________
(Chapter Representative)    (Signature)    Phone Number

__________________________  ____________________________  ____________________________
(Co-Sponsoring Chapter Representative)    (Signature)    Phone Number

__________________________  ____________________________  ____________________________
(Chapter Advisor)    (Signature)    Phone Number

__________________________  ____________________________  ____________________________
(Co-Sponsoring Chapter Advisor)    (Signature)    Phone Number