

Adrian College Greek Social Events Registration Form

This form is to be filled out completely, printed, signed and returned to the Asst. Director of Residence Life/Greek Life.

Hosting chapter(s): [Choose One] and [Choose One]

Today's Date:

Date of Event:

Time of Event:

Location of Event:

Name of President or Designee:

There must be at least **five event monitors working at all times**. Event monitors **must** be listed below with the hours they will be working.

Event monitors:

First Shift: 8-9

9-10

10-11

Second Shift: 9-10

10-11

11-12

1.

2.

3.

4.

5.

6.

1.

2.

3.

4.

5.

Third Shift: 10-11

11-12

12-1

Fourth Shift: 11-12

12-1

1-2

1.

2.

3.

4.

5.

1.

2.

3.

4.

5.

Type of Event: [Please note that as all Adrian College Greek housing facilities are designated as alcohol-free, the use or presence of **alcohol is prohibited at all on-campus events**. Off-campus events at which alcohol is present must comply with FIPG or national headquarter policies including 3rd party vendor requirements.]

Rush: Recruitment/Rush Event/Information Night:

Mixer: Mixers are events between two chapters and are limited to members only.

Alumni: Alumni events are limited to chapter members, alumni members, and their family members.

Family: Family events are limited to chapter members and their family members.

Other Social Event:

*** This form must be **completely filled out** and submitted to the **Assistant Director of Residence Life/Greek Life** no later than **4:00 PM Tuesday** prior to the event.

*** Guest Lists are not required but are encouraged for on-campus social (which prohibit alcohol). Guest lists are required at off-campus events where alcohol is served (formals, etc.)

We have notified our Chapter Advisor and are in compliance with our National rules and regulations.

Signature of Chapter President or designee

Title

Date

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For Official Use ONLY:

Date/Time Received: _____

Approved: Yes No

Signature: _____

See Social Events/Risk Management Policy

(revised 09/2005)

Reference: p. _____ sec. _____