UNCW FRATERNITY AND SORORITY LIFE
SOCIAL EVENT REGISTRATION FORM

General Event Information
Chapter Name: __________________________ Today’s Date: ___/___/____ Date of the Event: ___/___/____
Location of the Event: __________________________ Time of the Event: _______
Theme of the Event (if applicable): _______________________________________________________

Planned Attendance: # Members: _____ # Invited Guests: _____ Total Attendance: _______
Is this a 3rd Party Event? ______ Yes ______ No ______

Event Type
What Type of event? (Select one)
Mixer ______ Grab-a-date ______ NPHC Party ______ Semi-formal ______ Formal ______
* For Grab-a-dates, semi-formals, and formals please attach guest list (names and birthdays) *

What other chapters will be present?

NOTE: If more than one chapter is involved, all chapters must register the event & 4-way events are the largest events permitted

Method for safe, sober rides that will be used: Taxis ______ Charter Bus ______ Designated/Sober Drivers ______ Other Service ______
- If utilizing designated/sober drivers, how many will there be for the event? _______

Event Logistics
Alcoholic Beverages
Will alcoholic beverages be present at the event? Yes _____ No _____
- If yes, what type of alcohol will be present? (Select all that apply) Beer _____ Wine _____ Liquor _____
When will alcoholic beverages be permitted at the event? (Select all that apply) Before ______ During ______ After ______

Who will provide the alcoholic beverages present? (Select all that apply)
Third Party Vendor ______ Individual Members ______ Guests ______ Other: ________________________

Method of service: (Select all that apply)
Licensed Cash Bar ______ Chapter Members ______ BYOB ______ Other: ________________________
(Check-in & monitor)

Will the chapter receive funds from any charges made for alcoholic beverages? Yes _____ No _____
Will the chapter receive funds from any charges made for coolers or other BYOB containers? Yes _____ No _____

When and how will the verification of legal drinking age be accomplished?

How will those serving the alcoholic beverages differentiate persons of legal drinking age from underage attendees?

Food, Non-Alcoholic Beverages, Security, and Admission Charges
Will food be present at the event?
- If so, what type of food will be present? __________________________

Will non-alcoholic beverages be present? Yes _____ No _____
- If so, what type of non-alcoholic beverages will be present? __________________________

Has security been hired for this event? Yes _____ No _____
- If yes, please name the company: ________________________________________________

Will admission be charged? ______ Yes _____ No ______
- Is yes, what will admission cover: ________________________________________________

I the undersigned, affirm that the above listed social function will be in compliance with all Council, University, Federal, State, and Local policies and laws. The event will also be in compliance with the risk management policy of the above named organization.

All three signatures must be present.
Name of Person Submitting Form: __________________________ Phone Number/ Email: __________________________
Signature of Organization President: __________________________________________________________
Signature of Social Chair: _________________________________________________________________

Return to:
Hilary Loso, Coordinator of Fraternity and Sorority Life
Campus Activities and Involvement Center, Fisher Student Center