Colgate University Off-Campus Event Registration

I. Social Host Responsibility Guidelines

Events at which alcohol is to be served must be programmed in accordance with Colgate University’s Alcohol Policy. In all cases, the host (as defined as an individual or sponsoring group) must ensure that the following guidelines are maintained:

1. A copy of the contract between the chapter and third party vendor must be turned into the Office of Fraternity & Sorority Affairs Annex one week in advance before the event.
2. An event management plan should address the following:
   a. Transportation provided to and from the Event
   b. A copy of the contract to reserve the third party location describing the services being offered by the vendor (i.e. alcohol, security, food, non-alcoholic beverages, etc)
   c. Proof of Insurance from the National HQ
   d. A copy of the Chapter’s Risk Management Plan must be on file with the Office of Fraternity & Sorority Affairs Annex
   e. A list of sober monitors for the event

II. Colgate University: Off-Campus Event Registration

Name of sponsoring organization: ___________________________________________

Location: __________________________________________________________________

Date of Initial Conversation: __________    Anticipated Attendance: __________

Date of event: __________

Starting time of event: _______________ Ending time of event: ________________

Name of social host: _________________________ Phone number: _____________

Describe nature of audience/event: __________________________________________
________________________________________________________________________
________________________________________________________________________

Type of Event: _X_ Off Campus Catered

Signature of Officer and Title (Must be 21 years of age) ____________________ Date __________

Signature of TIPS Trained Social Host (Must be 21 Years of age) ________________ Date __________

Assistant Dean of Campus Life ____________________________________________________________________ Date __________
III. Financial Review

Before the event form is approved, a budget must be submitted by the Chapter Treasurer to the Office of Fraternity & Sorority Affairs Annex, Staff Accountant in applicable time to ensure funds are available within the Chapter’s account and payment can be processed by the Accounting Office.

Vendor Name: _______________________________ Date Funds Needed By: __________

Payment Amount: _________ (if multiple payments and vendors, please attach a comprehensive list for the OFSAA Staff Accountant)

Type of Payment:

_____ University Voucher _____ Direct Billing\Invoice (Check) _____ DB\Invoice with Budget Code

Items to be paid for:

☐ Food and Non-Alcoholic Beverages Vendor: _______________________________
☐ Colgate University Department Vendor: _______________________________
☐ Transportation Services Vendor: _______________________________
☐ Security Services Vendor: _______________________________
☐ Third Party Vendor Rental Fee Vendor: _______________________________

Budget Approval for Event: _______________________________  _______________________________

Chapter Treasurer  Suzie Meres, Staff Accountant
Office of Fraternity & Sorority Affairs Annex