Section III

Event Application – Rensselaer Polytechnic Institute

The request to hold a social event must be received at least fourteen (14) Institute business days before the event.

__________________________________________ requests permission to hold a social event.

Frataternity or Sorority Name

Location: _________________________________ Date of Event: ______

Contact Cell Phone Number: __________________ Event Type: ______

Time of Event: ____________________________
From _______ To _______

# of Invited Guests (Invitation List Attached): ______

# of Invited Guests Under the age of 21: ______

Alcoholic Beverages: □ Beer
□ Wine

Non-Alcoholic Beverages: □ ______________ Kind(s)

Checklist:

□ Sober monitors are identifiable

□ List of monitors is posted at the door

□ Attendees being permitted entrance to the event are listed on the invitation list as submitted to OFSA

□ Uninvited guests are not permitted to enter

□ Student ID plus a valid driver’s license, military ID, and passport are being checked

□ A hand stamp or wristband is used to designate invited guests as 21 or over

□ Event is not being held during Rush/New Member Recruitment period

□ Event is not being held as a new member/pledge event

□ A consistent supply of non-alcoholic drinks are supplied
Drinks containing alcohol are distributed appropriately and monitored consistently

Sufficient food is available and readily accessible

Event is limited to the common areas and/or large open space on ground floor as required for risk management

Event is not occurring outdoors

Outdoor area is being monitored and checked for excessive noise

All exits are clearly marked in case of emergency evacuation

The sponsoring organization agrees to comply with all NYS laws, City of Troy ordinances and Institute policies. It is understood that the sponsoring organization is responsible and accountable for all actions of their members and guests at the event. As the designated event contact of this organization, I acknowledge that I have read, reviewed and upheld the content of the Event Registration Form and am authorized to accept full responsibility for the event on behalf of my organization. I acknowledge that this organization, its membership, and advisor have read, reviewed, and agree to the terms, guidelines and policies stated in the Fraternity and Sorority Event Management document, uphold Institute policies, and comply with NYS law and City of Troy ordinances.

Print Name: __________________________________________

Signature: ____________________________________________________________________________________

Name of Organization: ________________________________________________________________

Email: ___________________________ Cell Phone: ___________________________

Event Contact(s):

<table>
<thead>
<tr>
<th>Name</th>
<th>Cell Phone</th>
<th>Email Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>_______________</td>
<td>__________</td>
<td>______________</td>
</tr>
<tr>
<td>_______________</td>
<td>__________</td>
<td>______________</td>
</tr>
</tbody>
</table>

For Office Use Only:

Date Received: __________________________ Approval Date: __________________________

Copy Sent to Public Safety: __________________________ Advisor Notification: __________________________

Duty Dean Notification: __________________________ Copied Form Picked Up: __________________________