Office of Student Activities & Greek Life
Social Event Registration Form

This form was created to expedite the registration process for on campus Greek social events. Typically these social events are held at fraternity houses, but may take place in other venues such as The Gathering Place or Hermann Bowl (but not limited to). These events are usually open to all Marietta College students and their registered guests. For event planners, completing this form will assist students in planning a safe event.

A student representing the sponsoring organization(s) must submit this form no later than one week prior to the anticipated date of the event. Event sponsors will be notified of the status of the registration (approved or not approved). Please note that incomplete forms will NOT be approved.

Please be aware that all social events must meet the following criteria:
Open to all Marietta College students and their registered guests (over the age of 18) only.
No alcohol is permitted at the event.

Sponsoring Organization(s): __________________________________________

Person completing form and phone number

Name ____________________________       Phone Number____________________________

Name(s) and phone number(s) of chapter officer(s) that will be present at the event (please attach additional sheet if necessary).

Name ____________________________      Phone Number____________________________

Name ____________________________      Phone Number____________________________

Advisor(s) Name

____________________________________________

Location of event: __________________________________________

Date of event (Please note, events will only be approved when held between the first and last day of classes each semester):

________________________________________

Event theme: __________________________________________

Event beginning time: _______________  Event end time: _______________
Name of Person notifying your RA (if held in a fraternity house):

________________________________________

Names of sober members that are monitoring the ENTRANCE (at least 2 names):

________________________________________  __________________________________

Will guests (over the age of 18) of Marietta College students be admitted to the event?
☐ yes ☐ no

If so, what identification will be required for admittance?
☐ Drivers’ license or state id
☐ College id card

How will intoxicated persons requesting admittance to the event be handled?
(Please attach additional sheets if necessary.)

Names of sober persons monitoring the EXITS(s) of the event. (If same as entrance, please list names again). Please ensure guests of your event are leaving the event safely.

________________________________________  __________________________________

________________________________________  __________________________________

Names of sober persons monitoring the OPEN area(s) of event.
There must be at least one sober person from the sponsoring organization(s) per 25 guests.

________________________________________  __________________________________

________________________________________  __________________________________

In the event of a problem, how will the event be ended safely?
(Attach additional sheets if necessary.)
Who is monitoring the noise level (provide name and phone number) and how will noise complaints be handled? *(Attach additional sheets if necessary.)*

### AGREEMENT SECTION (Please initial next to each):

- [ ] The sponsoring organization(s) [WE] have read the Alcohol Policy and Student Organization Policies and agree that the event will abide by all State laws, college policies per the Student Handbook, and event registration guidelines.
- [ ] WE recognize that the college will not accept alcohol use by our guests for the members of the sponsoring organization(s) as an excuse for misconduct.
- [ ] WE agree that the event will follow the specifications of this approved Event Registration form.
- [ ] WE agree that the event will be in compliance with the risk management policies set forth by our (inter)national headquarters.
- [ ] WE understand that publicity relating to this event may not be posted until approval is received.
- [ ] WE understand that, if approved, this form must be available at your event upon request.

______________________________
Social Chair Signature & Date

______________________________
Risk Manager Signature & Date

______________________________
President Signature & Date

______________________________
Advisor Signature & Date

### OFFICE USE ONLY:

Date Received:

[ ] Approved
[ ] NOT Approved

Signature: ________________________________