Event Planning Form and Pre-Event Checklist

MSU GREEK COMMUNITY

Minnesota State University, Mankato

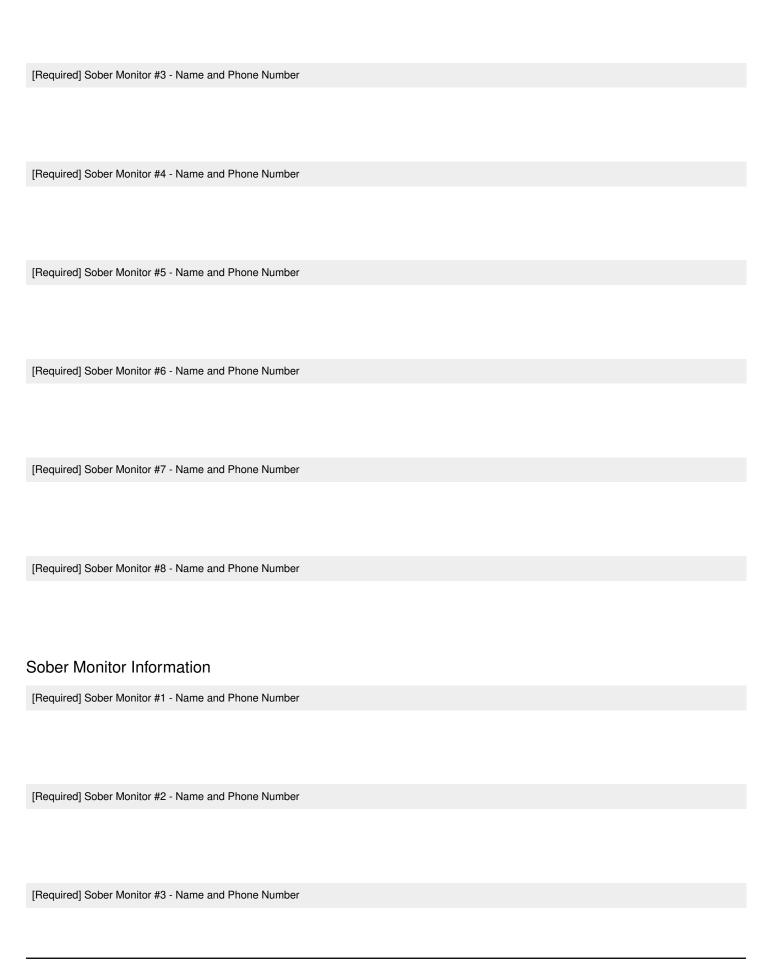
Revised Spring 2014

[Required] All Chapters Involved:
[Required] Detailed Explanation of Event:
[Required] Start Date and Time:
[risquists] start Bate and Time.
[Demissed] Fad Date and Time.
[Required] End Date and Time:
[Required] Type of Event:
[] Exchange [] Fundraiser
i j House Party i j House Party i j Sisterhood/Brotherhood
[] Philanthropy
[] Other
[Required] Locations Name and Address:
[Required] Expected Attendance: Valid input:
- Numeric - ex: 1111
[Required] Terms and Conditions
The above listed social function will be in compliance with all PanHellenic and Interfranternity councils, university, local, state, and federal guidelines. It will also be in compliance with the above named organizations risk management policies and that all chapter presidents, social chairs, and any non-Greek participating parties are aware
of and accept these terms and conditions. Valid input:
- Select only one choice.
[] I Agree
[Required] Is Alcohol Present? Valid input:
- Select only one choice.
[] Yes
[]No
Pre-Event Checklist:
[Required] What non-alcohol beverages and non-salty foods are provided?

[Required] Is security confirmed the event? Valid input: - Select only one choice.
[] Yes [] No
[Required] Have the neighbors been notified? Valid input: - Select only one choice.
[] Yes [] No
[Required] How are exits and entrances marked?
Alcohol Present Form
List two people responsible for checking ID's and their phone numbers to contact them, if need be.
[Required] ID Checker #1 - Name and Phone Number
[Required] ID Checker #2 - Name and Phone Number
[Required] Expected Attendance for Sober Monitor Purposes: Valid input: - Select only one choice.
[] 0-50 [] 51-100 [] 101-150 [] 151-200 [] 200+
Third Party Vender Information:
(please fill out completely and make sure "Certificate of Liability Coverage" has at least \$2M of coverage)
Liquor License:
"Certificate and Liability Coverage"
Third Party Vender Contact Information: Valid input: - must be 10-15 digits long and may include only numbers, hyphens, and spaces name@myschool.edu

First name: Middle initial: Last name: Email address: Phone number: Address: City: State: ZIP:
FOR EVENTS WITH ALCOHOL: please attach a pre-event attendance list of those who actually attended, and the rules for this event. The pre-event attendance list must be submitted within 48 hours of that event and can be submitted separately via e-mail to Jasmine. Shipman@mnsu.edu or lan. Elhard@mnsu.edu. The social/ sober event monitors should also be marked on this list with stars. This social planning event form however, needs to be submitted AT LEAST two weeks prior to an event.
[Required] How will you distinguish people that are over 21?
[Required] Is your invite list complete? Valid input: - Select only one choice.
[] Yes [] No
Invite List:
Sober Moniter Information
[Required] Sober Monitor #1: - Name and Phone Number
[Required] Sober Monitor #2 - Name and Phone Number
Oelean Maritan Information
Sober Monitor Information
[Required] Sober Monitor #1 - Name and Phone Number
[Required] Sober Monitor #2 - Name and Phone Number
[Required] Sober Monitor #3 - Name and Phone Number

[Required] Sober Monitor #4 - Name and Phone Number
Sober Monitor Information
[Required] Sober Monitor #1 - Name and Phone Number
[Required] Sober Monitor #2 - Name and Phone Number
[Required] Sober Monitor #3 - Name and Phone Number
[Required] Sober Monitor #4 - Name and Phone Number
[Required] Sober Monitor #5 - Name and Phone Number
[Required] Sober Monitor #6 - Name and Phone Number
Sober Monitor Information
[Required] Sober Monitor #1 - Name and Phone Number
[Required] Sober Monitor #2 - Name and Phone Number



[Required] Sober Monitor #4 - Name and Phone Number
[Required] Sober Monitor #5 - Name and Phone Number
[Required] Sober Monitor #6 - Name and Phone Number
[Required] Sober Monitor #7 - Name and Phone Number
[Required] Sober Monitor #8 - Name and Phone Number
[required] coder Monitor #6 - Name and Findre Number
[Required] Sober Monitor #9 - Name and Phone Number
[Required] Sober Monitor #10 - Name and Phone Number