

Greek System Event Planning Checklist

Hosting Chapter(s): _____

Location of Event: _____ Date of Event: _____

Type of Event: party exchange other: _____
(please circle)

Please initial the following items:

- _____ A guest list and/or invitations will be utilized
- _____ Identification will be checked by: _____
- _____ Individuals of legal drinking age will be identified with:
 - wristband
 - stamp
 - other: _____
- _____ A “beer check” will be utilized using:
 - tickets
 - punch card
 - other: _____
- _____ Non-alcoholic beverage will be provided
- _____ Food will be provided
- _____ Members will be assigned to stay substance-free in order to provide safe transportation
- _____ Security will be utilized through (company): _____

The following person(s) are designated as the contact person(s) for the Event. By signing this form as the contact person, I (we) are agreeing to be present throughout the event and are promising to meet with local law enforcement at the Event location as the organization’s representative should law enforcement so request. I (we) also agree to notify NDSU Police and the Fargo Police in advance that we are holding an event and I (we) will notify them either by phone or by providing them a copy of this checklist. Notifying and meeting with law enforcement is not intended to waive any legal rights that individuals or the organization may have.

Contact Person Name Printed	Phone #	Signature
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As officers of the chapter(s) involved, we verify that all items on this checklist will be followed. We also assure that all University, Greek, and National risk management policies will be followed. I understand that if any of these items is neglected or if any of the aforementioned policies are violated, my chapter will be brought before the appropriate Standards Board.

Signature of President(s): _____

Signature of Risk Reduction/Standards Chair(s): _____

This checklist must be submitted to the Coordinator of Greek Life and Student Organizations at least 2 weeks prior to the event.