

**CSU Greek Community Joint Policy on Risk Management**  
**ALCOHOL-FREE EVENT REGISTRATION FORM**

(If multiple chapters are cosponsoring/participating, each chapter must complete this form separately)

**This form and required documents below must be submitted in the Greek Life Office  
by the Tuesday prior to the event at 5:00pm.**

Current Guest List (*Not required for a Date Dash*)

The chapter does hereby accept full responsibility for the event stated below. In accepting this responsibility, the chapter will make certain that all applicable federal, state, province, county, city, and Colorado State University laws and policies, as well as the Greek Community Joint Policy on Risk Management and their Inter/National Organization Risk Management Policies and Procedures are enforced. The chapter understands that the chapter is required to regulate the behavior of all individuals in attendance during the event. The chapter understands that failure to abide by all terms of this agreement and all event policies and regulations may result in disciplinary action. The chapter understands that a chapter cannot host/participate in this event without full completion of this registration form and emailed confirmation by their respective governing council.

**EVENT INFORMATION**

Chapter Name: \_\_\_\_\_

Other Co-Sponsoring/Participating Chapters: \_\_\_\_\_

Date of Event: \_\_\_\_/\_\_\_\_/\_\_\_\_ Start Time: \_\_\_\_:\_\_\_\_ am or pm End Time: \_\_\_\_:\_\_\_\_ am or pm

Event Description: \_\_\_\_\_

If the event is hosted by a single chapter, is this event considered a Date Dash? Yes or No

*A Date Dash event allows for the guest list to be submitted within 24 hours from the start of the event; and requires a 1:1 member to guest ratio*

**NUMBER OF ATTENDEES**

Chapter Members Attending - \_\_\_\_\_ +  
Guests of Chapter Members Attending - \_\_\_\_\_ =  
**Total Number of Chapter Attendees and Guests:**  
\_\_\_\_\_

*(Note: For co-sponsored events, no more than ten (10) non-member guests per chapter may be in attendance; If the event is not a closed event co-sponsored by agreed chapters, function attendance must not exceed a three (3) to one (1) ratio of guests to members of the hosting chapter, if the chapter has more than 15 active members. If the chapter has 15 or fewer active members, function attendance must not exceed a six (6) to one (1) ratio of guests to members of the hosting chapter.)*

**LOCATION**

Name of Location: \_\_\_\_\_ Address of Location: \_\_\_\_\_

Host Phone Number(s) for Location: \_\_\_\_\_ Location Capacity: \_\_\_\_\_

*(Location Capacity must be equal to or larger than the total number of attendees from all participating chapters)*

*By signing this form, the Chapter President, Risk Management Officer, and Social Chair vouch that*  
**NO ALCOHOL WILL BE PRESENT AT THIS EVENT**

Chapter President: \_\_\_\_\_  
(Print Name) (Signature) (Phone Number) (Email Address)

Risk Management: \_\_\_\_\_  
(Print Name) (Signature) (Phone Number) (Email Address)

Event Planner/Social: \_\_\_\_\_  
(Print Name) (Signature) (Phone Number) (Email Address)

**FOR GREEK LIFE OFFICE USE ONLY:**

Date and Time Received: \_\_\_\_\_

Staff Member: \_\_\_\_\_

**FOR GOVERNING COUNCIL USE ONLY:**

Date and Time Reviewed: \_\_\_\_\_

Reviewer: \_\_\_\_\_

Date and Time Confirmation Email Sent: \_\_\_\_\_