

**UMassAmherst**  
**Office of Fraternities and Sororities**

**OFF CAMPUS EVENT REGISTRATION FORM**

Chapter(s) Sponsoring Event: \_\_\_\_\_

Contact person: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Purpose of Event: Fund Raising      Philanthropy      Social      Alumni

Other (specify): \_\_\_\_\_

Date of Event: \_\_\_\_\_ Time: \_\_\_\_\_

Location of Event: \_\_\_\_\_

Contact Person for Vendor: \_\_\_\_\_

Phone Number for Vendor: \_\_\_\_\_

Statement of Understanding: The vendor/agent of the host site understands that the agency is responsible for the following standards:

- 1) Agency provides security staff that monitors door, collects funds, and checks identification. The guest organization will not provide volunteers to assist with these tasks.
- 2) Only guests with proper identification/proof of age will be served alcoholic beverages.
- 3) Agency staff will not serve guests who are visibly intoxicated.
- 4) Documentation of funds collected to be submitted to Office of Fraternities and Sororities within one business day of the event.
- 5) All safety, health and fire codes will be enforced.
- 6) Chapter funds or collected monies may not be used for the purchase of alcohol. (Cash Bar Only)
- 7) The University Code of Student Conduct is in force during the event. The guest organization is obligated to abide by all applicable policies of the University, in addition to the local community and the national organization.

\_\_\_\_\_  
Signature of vendor/agent

\_\_\_\_\_  
Organization representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

Form must be submitted to Office of Fraternities and Sororities one week before event.