

**Texas State University**  
**Dean of Students – Greek Affairs Office**  
**Alcohol-Free Event Registration Form**  
*(Please print all information except signatures)*

**Dean of Students-Greek Affairs • LBJ Student Center 4-14.1 • 512-245-JOIN (5646)**

**FORM MUST BE SUBMITTED AT LEAST ONE WEEK PRIOR TO THE EVENT. MUST BE DATE STAMPED**

Fraternity/Sorority Name(s)	#1 Org	#2 Org
Date of the Event		
Start & End Time of the Event		
Expected # of people in attendance		
Location of the Event: <i>Name</i>		
Location of the Event: <i>Address</i>		
Primary Contact Person's Name		
Primary Contact Email & Phone Number		
Secondary Contact Person's Name		
Secondary Contact Email & Phone Number		
Who will be checking the guest list?		
Type of Event (Check all that apply)	<input type="checkbox"/> Brother/Sisterhood <input type="checkbox"/> Community Service <input type="checkbox"/> Date Party <input type="checkbox"/> Educational Programs <input type="checkbox"/> Formal <input type="checkbox"/> Mixer <input type="checkbox"/> Parent/Alumni <input type="checkbox"/> Philanthropy <input type="checkbox"/> Recruitment/Intake <input type="checkbox"/> Other _____	
Will Security be used? # of Officers		
What type of food & beverages will be available?		
Is Transportation provided?	<input type="checkbox"/> Cars <input type="checkbox"/> Bus <input type="checkbox"/> Other _____ <b>If Bus, include name of company, pick up, and drop off location(s) including times</b>	

*By signing below, we understand that the organization(s) listed above as sponsors are responsible for following all applicable University, National Organization, county, state and federal laws.*

*We understand that it is the responsibility of ALL organization members, especially the officers, to ensure the safety of our members and guests at our event.*

*We understand that this is an alcohol-free event.*

*We also understand that if it is discovered that any of the sponsoring organizations are not following the appropriate policies, all sponsoring organizations may face university sanctions, including but not limited to organization suspension.*

\_\_\_\_\_  
 #1 Org Print Name of President / Email / Phone Number

\_\_\_\_\_  
 Signature of President      Date

\_\_\_\_\_  
 #1 Org Print Name of Advisor / Email / Phone Number

\_\_\_\_\_  
 Signature of Advisor      Date

\_\_\_\_\_  
 #2 Org Print Name of President / Email / Phone Number

\_\_\_\_\_  
 Signature of President      Date

\_\_\_\_\_  
 #2 Org Print Name of Advisor / Email / Phone Number

\_\_\_\_\_  
 Signature of Advisor      Date