



CAMPUS ALCOHOL POLICY

Proposal for Event

Host Organization

Do not write in
this space

Approved

Name of Organization:

Address:

Telephone: Email:

Name of President: Student Number:

Address:

Telephone: Email:

Event Organizer: Student Number:

Address:

Telephone: Email:

Event

Date of Event:

Venue: Wave Spoke Grad Club Timeout Lounge Other UWO Off Campus

Name of Off-Campus Establishment:

Be sure to complete the Description of Event AND Off-Campus Event sections.

Description of Event:
(see also Off-Campus Event section next page)

Be sure to mention: theme of event; scheduled activities; approximate timetable; availability of food(s); number of participants; supervisory personnel; number of monitors (Event Staff/host organization personnel); Smart Serve graduates; recognized first aid trained personnel.

Additional Information About Off-Campus Event:

Be sure to mention: Smart Serve (CAP 9(a)); describe the type and quantity of food and non-alcoholic beverages (CAP 9(c) (d)); cash bar, tickets, BYOB? (CAP 9(f)); extra strong/extra large drinks, shooters, kegs, special deals? (all prohibited CAP 9(e)).

Transportation:

(Complete for on-campus and off-campus event)

Be sure to mention: how participants will arrive and depart; compliance with the USC Trip Policy; London Transit (attach confirmation); pick-up/drop-off destinations (both ways); Care Plan for the intoxicated (on-campus/off-campus residents).

Additional Information:

Please use this space if there is additional information that may be useful to the Committee.

Compliance with Alcohol Policy

Will persons under age 19 attend the event?

Yes

No

How Many?

What controls will prevent underage consumption of alcohol?

NOTE: Please attach the names, student numbers and contact information for Executive Officers and designated non-drinkers who will attend this event.