

REQUEST TO USE ALCOHOLIC BEVERAGES ON UNIVERSITY PROPERTY

UNIVERSITY OF MISSOURI

Please return completed form to: concertseries@concertseries.org or mail to 305 Jesse Hall (Request is to be submitted one week prior to the date of intended use)

1. LOCATION OF PROPOSED ACTIVITY _____

2. DATE OF THE EVENT _____ TIMES: _____ / _____
From To

PLEASE NOTE: All alcohol must be ended at _____ due to University Regulations.

3. DESCRIPTION OF THE EVENT

- Purpose of event _____
- Type of alcohol to be served _____
- Method of service _____
(i.e. wine/cheese reception, wine served with meal, etc)
- Funding source for purchase of the alcohol _____
(i.e. gift funds, admission charges, etc)

4. PRIMARY GROUP THAT WILL BE ATTENDING EVENT

____ Faculty/Staff ____ Students ____ Other (please specify)

5. DEPARTMENT OR ORGANIZATION MAKING APPLICATION

Name of Person Submitting Request

Email Address

Department or Organization Name

Address

Phone #

6. RESPONSIBLE PERSON AT THE ACTUAL EVENT

All persons attending the activity must comply with applicable federal, state and University regulations. I accept personal responsibility for ensuring that University policy and state laws governing use of alcoholic beverages are complied with, and accept financial responsibility for the activity.

Signature of Person Responsible

Printed Name & Email Address

Address of person responsible

Phone #

Date

7. _____

BUILDING COORDINATOR SIGNATURE

Phone #

Date

8. _____

CATERING REPRESENTATIVE SIGNATURE

Phone #

Date

The use of alcoholic beverages at the proposed activity is: _____ APPROVED _____ DISAPPROVED

Additional requirements needed for approval _____

John Murray, Director II

Date

Revised 01/09/17