



STUDENT AFFAIRS
STUDENT ENGAGEMENT
AND CAMPUS LIFE
VIRGINIA TECH.

Event Services

221 Squires Student Center
540.231.5005 | eventservices@vt.edu

Reservation# <i>(office use only):</i>	
Form Accepted By <i>(office use only):</i>	
Date Received <i>(office use only):</i>	
Reservations Coordinator <i>(office use only):</i>	

Last Updated: 07/2019 SS

Alcoholic Beverage Request form

Sponsor Required to Submit

Sponsor not Required to Submit

Sponsoring Org/Department Requesting: _____

Authorized Contact: _____

Description of Food and Beverages being Served (include Caterer's Name, if applicable):

Name of Individual/Caterer who plans to serve Alcoholic Beverages at the Event: _____

[If difference from the caterer/individual listed above]

Event Location: _____

Event Date: _____

Event Time: _____ until _____

Anticipated Number of Event Attendees: _____

Percentage of attendees UNDER 21 years of age: _____

Describe Plans to Prevent Underage Consumption at the Event:

NOTE: YOU MUST SUBMIT A SECURITY FORM AND AN ABC LICENSE WITH THIS REQUEST.

As an authorized representative of a University student organization/department, my signing this form below indicates that I have read, understand, and will adhere to applicable University policies and state laws. I understand my organization/department's failure to do so may result in loss of event approval and/or further sanctioning.

Signature of Authorized Contact: _____ **Date:** _____

FOR COMPLETION BY THE VIRGINIA TECH POLICE DEPARTMENT:

Received back from VTPD by the Event Planning Office on (date): _____ by _____

Standard Approval – this request meets general University and Student Engagement and Campus Life Guidelines

Additional Notes/Contingencies for Approval: _____

Signature of Representative of Virginia Tech Police Department: _____ *Date:* _____

FOR OFFICE USE ONLY:

Recorded in Risk Management log and EMS on (date): _____ by _____

Communicated approval or denial to Requestor on (date): _____ by _____